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THE

CLINICAL GUIDE;

PART IV.

CONTAINING

THE TREATMENT

AND

Diſeaſes of Infancy and Childhood:

WITH

A VIEW OF NOSOLOGY.

17 B

THE

CLINICAL GUIDE;

OR, A

CONCISE VIEW

OF THE LEADING FACTS ON THE HISTORY, NATURE,
AND TREATMENT,

OF THE

STATE AND DISEASES

OF

INFANCY AND CHILDHOOD.

WITH AN APPROPRIATE

PHARMACOPŒIA,

Divided into Three Parts, viz. Materia Medica, Classification, and Extemporaneous Prescription:

INTENDED AS

A MEMORANDUM-BOOK FOR PRACTITIONERS.

TO WHICH IS SUBJOINED,

AN INTRODUCTION TO NOSOLOGY;

OR, A VIEW OF

THE MOST APPROVED NOSOLOGICAL SYSTEMS,

PARTICULARLY THAT OF THE LATE DR. CULLEN;

Adapted, with certain Alterations, to

THE PRESENT WORK.

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PREFACE.

THE medical treatment of Diſeaſes of Infancy, though a ſubject of much importance in practice, has only of late had that attention paid to it by phyſicians that it merited: the works, therefore, on this department of medicine, are few in number, and their limits not ſo far extended as the variety of ſubjects occurring in the routine of infant practice warrants. Having, in the former volumes of this work, gone through a general detail of practice in medicine, ſurgery, and midwifery, it ſeemed to remain unfiniſhed while the ſtate of infancy, and its diſeaſes, did not meet the ſame detail: an additional volume, therefore, to contain the Treatment and Diſeaſes of Infancy, was deemed proper to complete the plan; and that is now offered to the Public, it is hoped in ſuch a manner as to be equally uſeful with the other parts of the work.

This volume contains alſo a View of Noſology; a part too little attended to, and from his knowledge of which chiefly, or his juſt diſcrimination of the nature of diſeaſes from external appearance, the reputation of a phyſician ſhould properly be eſtimated. The ſyſtem of Dr. Cullen is adopted, with ſuch alterations as it is hoped will render it ſtill more uſeful; and with references to the diſeaſes, as treated in this and the preceding volumes.

St. James's-ſtreet,
Sept. 20, 1800.

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INTRODUCTION.

I. HEALTH consists in the several parts of the body enjoying their particular functions; and as these functions are found more or less complete at birth, so the tendency to future health or disease becomes, in consequence, coeval with life.

II. The functions of the system, at birth, differ in some respects from what afterwards take place; and in order to understand this difference, a previous consideration of the fœtal state, or that imperfect existence which precedes birth, and the peculiarities which attend it, it is necessary to be acquainted with.

III. From the view of the formation of the uterine contents, formerly detailed (*vide* vol. iii. p. 26), the life of the fœtus may be divided into three periods, drawn both from its apparent state of existence and its mode of nutrition.

IV. With reſpect to the former, we obſerve, that from the firſt detection of the fœtus, to the period when the punctum ſaliens appears, it enjoys entirely, as far as can be traced, a ſtate of vegetable exiſtence, which may be termed the period of ſimple animation; from the appearance again of the punctum ſaliens to the period of motion, when the mother herſelf is conſcious of its exiſtence, may be named the period of incomplete animal life; and from theſe firſt faint motions of the fœtus, which gradually increaſe and become ſtronger, to the time of geſtation, may be conſidered as the period of complete animal formation.

V. In regard to the latter, or mode of nutrition, the ſame diviſion is allowable; for, on conſidering the ſtate of the fœtus, at firſt, the connection between the vegetable and animal kingdom ſeems ſtrongly ſupported: its nouriſhment it ſeems to receive originally from the ſurface; and it is not until the umbilical veſſels are fully formed that the mode of nutrition is altered. Hence, during the firſt period, ſimilar to ſimple vegetable life, it draws its nouriſhment from the ſurface or ſurrounding fluids, and betrays no evident marks of exiſtence. The ſecond period may be viewed as that of limited animal life, when it gives proofs of its poſſeſſion of it, but when its powers are ſtill ſo contracted as to be incapable of forming nouriſhment for its ſupport, but receives it through certain veſſels of the ſyſtem of the mother; and the third period is that of the full or complete poſſeſſion of the animal powers, when it is ſeparated from its connection with the parent, and the neceſſary changes in its frame occur, fitting it for ſupporting life.

VI. To judge of the neceſſary changes that then take place in the ſyſtem of the fœtus, its peculiarities, or difference of ſtructure from the adult, fall to be noticed. Theſe peculiarities, though more obviouſly diſplayed in its circulation, may yet be traced through every part of its ſyſtem; and they may, therefore, be divided into thoſe which ſeem intended merely to adapt it to its ſituation, and into thoſe which have alſo a certain influence on its paſſage to delivery.

The former conſiſt in,

1. The different courſe of its circulation; and
2. The ſtate of particular organs; and

The latter, in the different connection of its more ſolid parts.

Fœtal Circulation.

VII. In deſcribing the courſe of its circulation, the placenta poſſeſſes, we obſerve, at its ſurface next the child, one large vein, which, running along the umbilical cord, compoſes the principal ſhare of it, and, entering the navel of the fœtus, terminates in the vena portarum. In order, however, to prevent the whole blood ſent by the placenta from circulating through the liver, which, as being poured into the vena portarum, it would do, a communication between the latter and the vena cava, peculiar to the fœtus, is formed; and in this way part of the blood is allowed to take a different courſe, or to paſs directly into the cava: from the vena cava the blood is ſent to the right auricle of the heart; and in the adult, from the right auricle it is all diſcharged into the right ventricle. But inſtead of this, in the fœtus, a communication between the two auricles takes place, by a ſort of orifice covered with a valve, which is named,

from its appearance, the foramen ovale. By this means one half of the fluid, which ſhould naturally paſs into the right ventricle, and from that into the pulmonary artery, to circulate through the ſubſtance of the lungs, by paſſing immediately into the left auricle, is directed into the aorta, and the pulmonary artery is ſtill farther deprived of its proportion of circulation to the lungs, by another communication peculiar to the fœtus taking place between it and the aorta; ſo that in this way, on a groſs calculation, by the communication between the auricles, the lungs are deprived, we may ſuppoſe, of nearly one half their circulation, compared with the quantity of fluid that paſſes into their ſubſtance after birth; and by the ſecond communication, between the pulmonary artery and aorta, they are deprived of a part more; ſo that only one-fourth of their proper circulation is admitted into them, or merely what is ſufficient to preſerve their vitality, ſimilar to any other part poſſeſſing no peculiar or important function. The blood then paſſing in theſe ways into the aorta, is diſtributed through the body; and that portion of it entering the internal iliac arteries, which, in the fœtal ſtate, are larger than the external, contrary to what happens in the adult, is directed into two branches ariſing from them, peculiar to the fœtus, which, piercing the navel, form the umbilical arteries, and carry the fœtal blood to be tranſmitted through the circulation of the placenta, where it is ſuppoſed to receive certain neceſſary changes, adequate to what ariſe from the uſe of reſpiration after birth.

VIII. Though this is the moſt common opinion of the courſe of the fœtal circulation, yet many objections have been urged, by different authors, againſt it.

The first that deserves attention is that proposed by Mr. MERY, in the Memoirs of the Royal Academy of Surgery, who observes, that the capacity of the pulmonary artery is larger than that of the aorta in the fœtal state; that the right ventricle is more capacious than the left; and that the pulmonary veins are much smaller than the branches of the vena cava. From these observations he infers, that did the circulation proceed in the manner explained, the capacity of the left auricle should be superior to that of the right, and that the aorta should be larger than the pulmonary artery: but as this is not the case, he is led to believe that the blood must pursue a different route. The blood then, being received from the vena cava into the right auricle, is pushed from it into the ventricle; from the ventricle it is directed into the pulmonary artery; and by the latter is distributed through the substance of the lungs, except where part of it passes into the canalis arteriosus, being returned to the left ventricle by the pulmonary veins; from which it is partly directed again into the right auricle, through the foramen ovale, and partly passes into the left ventricle, from which it is sent into the aorta, and is thus distributed over the system. In this way the greater part of the mass of blood pursues, in the fœtus, a very short course.

IX. This theory was favoured by a number of authors, who pretended, by dissection, to support his discovery; while it is controverted again by others of equal respectability, who deny the facts on which it is founded. Mr. WINSLOW, the celebrated anatomist, has endeavoured to reconcile this theory with the common opinion entertained, by observing, that, from the com-

munication between both auricles, the heart is to be conſidered as poſſeſſing but one auricle, forcing the blood into two diſtinct ventricles; that from the one ventricle it is ſent into the pulmonary artery, while the canalis arterioſus prevents greater part of it from paſſing into the lungs; and from the other ventricle it is tranſmitted immediately into the aorta. But in this way, it may be remarked, the valve of the foramen ovale is rendered uſeleſs; and we cannot ſee any reaſon for the peculiar diſpoſition of the fœtal circulation if this takes place.

X. A later theory than this is one propoſed in the Peterſburg tranſactions, where, inſtead of the communication of the foramen ovale being admitted, it is, on the contrary, maintained that no connection prevails at all between the auricles. This theory is ſaid to be likewiſe founded on anatomical obſervation, and is prefaced by the author, with obſerving, that as, after birth, the contraction of both auricles is ſimultaneous, or performed at once, ſo blood cannot poſſibly be received from the one into the other, or the contractions of them muſt be performed at different times. This, however, cannot be ſhown; and if it could, it is probable that, after continuing for the whole of the fœtal ſtate, it ſhould remain for the whole of life. This theory is founded on an obſervation, that the vena cava, before going to the heart, divides into two branches; one of which enters at the right auricle, and the other paſſes into the left at the ſituation of the foramen ovale.

There is, indeed, a great deal in the reaſoning employed by this author to ſupport his theory; but farther obſervation is neceſſary to confirm it; and the merit of

his discovery as yet rests merely with himself. The old opinion, therefore, is still more generally followed, though it may be difficult to ascertain in what precise manner the vessels peculiar to the fœtus are so easily contracted after birth; for, in the space of a very short time, we find almost no vestiges of the course of the former circulation to be traced.

State of Fœtal Organs.

XI. From the fœtal circulation, the peculiarity most dwelt on by authors, we examine next the state of its organs;—and the first to be noticed is that of the lungs.

The lungs of the fœtus appear, on dissection, of a compressed form, more solid, and darker coloured, than after birth. This proceeds from the small quantity of blood, which, from the course of the fœtal circulation, necessarily enters their substance; and from this circumstance of their increased solidity, at this period, an attempt has been made to ascertain, by experiment, in cases of still-birth, whether the child has once respired. As an opinion is frequently required on this subject, and the fate of the mother determined by it, it is necessary that it should be made with the strictest accuracy, and those several accidental circumstances marked which may influence its issue.

This experiment consists in cutting out a portion of the lungs, and throwing it into water; for before respiration, as they contain no quantity of air to render them specifically lighter, but are equally solid with any other part of the body, it will naturally sink, while, if respiration has once commenced, and that for a period however short, the reverse will take place. But in those cases, where, after death, the child has been retained in

the uterus for ſome time, and a degree of putrefaction has been induced, although there has been no inflation of the lungs, yet, on immerſing them, they will continue on the ſurface of the fluid, from a quantity of air, the effect of putridity, generated in their ſubſtance. But, in this caſe, ſeveral other parts of the body, which are naturally denſer than water, will be found, from the ſame cauſe, to undergo the ſame change; and therefore ſeveral parts of the body ſhould always be tried, to prevent any fallacy in the experiment. Another circumſtance too, that may influence its iſſue, is the particular part of the lungs from which the portion is taken for the experiment. Thus, if a child, though dead born, is laid on its face, the upper part of the lungs will frequently come to be inflated, though it has never properly breathed; and if any of this upper part is taken, it will ſwim, thereby leaving us to form an opinion different from what is really juſt. Beſides, children, we know, frequently die at birth, after two or three inſpirations, either from the difficulty of the previous labour, or a morbid ſtate of the ſyſtem. Hence, from this experiment, no concluſive opinion can be properly drawn. The ſituation of the mother, and other circumſtances, muſt determine her fate; for the accoucheur, after performing the experiment with the greateſt accuracy, on account of the fallacy which may take place, can only hint ſuſpicion, but offer no decided opinion.

XII. In the adult, the action of the lungs is found of great importance to the brain, and they poſſeſs a certain alternate motion with each other. This would ſeem neceſſary to preſerve an active ſtate of the vital power; for, in the fœtus, when this motion does not take place, we have reaſon to believe that a general inſenſibility, or

what may be termed incomplete life, prevails; and of this we have proofs in the very great preſſure which the brain is then capable of bearing.

XIII. The next organ to be remarked, from its contiguous ſituation, is the thymus, a glandular body peculiar to the fœtus, and placed over the great veſſels which are ſent from the heart. This body, in the fœtus, is very large; it remains after birth, but gradually decreaſes; and in the adult its former ſituation cannot be detected: its uſes we are unacquainted with. Many conjectures, indeed, have been formed on them; but theſe appear far from impreſſing any conviction of its real nature. Mr. Hewson has conſidered it as an appendage of the lymphatic ſyſtem, and that it bears a chief part in the formation of the red globules of the blood; but blood, we find, appears in the placenta while the fœtus is yet in a pellucid ſtate; and this blood, therefore, being carried to the fœtus in a perfect ſtate, does not require any organ like this to render it more complete. The chief circumſtance of difficulty, with regard to this gland, is to account for its decreaſe. In the fœtus it ſeems evidently ſupplied by ſeveral veſſels.—We cannot, after birth, perceive any mechanical cauſe to operate in effecting its diminution: we can only therefore conclude, that its decreaſe muſt be owing to an obſtruction of its circulation, preventing the tranſmiſſion of fluids to it in the former quantity. The manner, however, in which this happens, we are not acquainted with.

XIV. The next organ in order, deſerving notice, is the liver. Its ſize exceeds greatly its proportion with

the other organs of the fœtus, ſo as to fill both hypochondria; and its colour is alſo conſiderably paler: but the cauſe of this we cannot pretend to aſcertain.

XV. The kidneys alſo, in the fœtal ſtate, differ ſomething in their ſtructure. They are divided into diſtinct lobuli, ſimilar to thoſe of the quadruped; but this diviſion ſoon departs after birth: and the uſe of ſuch a peculiar ſtructure we cannot determine, further than as it may leſſen the quantity of ſecretion, which is at this period unneceſſary.

XVI. The next peculiarities are found in the genital organs.

Thus the bladder of the fœtus is more oblong than it is in the adult; and from the upper part there ſeems to proceed a particular duct, called the urachus, though it is here different from what is obſerved in the quadruped; for there it is a real duct, connected with a particular membrane, named the alantois, the cavity of which ſerves for the reception of the urine of the fœtus: but, in the human fœtus, it forms merely a ſuſpenſory ligament; and, by preſſing the bladder, you are not able to force into it a ſingle drop of urine. Many authors, however, pretend that it is a real canal, and that they have been able to fill it by injection; though this is a point that admits ſtill of conſiderable doubt.

XVII. In the male, during its continuance in the uterus, the teſticles are found contained within the abdomen; and it is not until birth, and even ſome time after, that they gain their proper ſituation. They ſeem originally ſituated near the kidneys, and gradually de-

ſcend as geſtation advances. The cauſe of their original ſituation we cannot eaſily explain: it has afforded much conjecture to moſt phyſiologiſts, and the explanation of it remains ſtill myſterious. From this circumſtance of their deſcent, which is at the ring of the obliquus deſcendens muſcle, when preſſure is applied, either from delivery or accidentally, ſome ſhort time after birth, before a proper adheſion of the ſides of the ring takes place, ſome portion of inteſtine is puſhed through this part, forming hernia; and from the period at which it happens, it receives the particular appellation of congenita. To know this diſeaſe,—when a fullneſs appears at this part, it is neceſſary to aſcertain whether both teſticles are already in the ſcrotum: if they are, we are certain it is owing to the former cauſe. But, in many inſtances, it has been obſerved that one teſticle is longer in deſcending than the other; nay, that it has not happened until after the age of puberty, and has even never taken place: and in Mr. POTT's treatiſe there are ſeveral examples of the former, where the true deſcent of the teſticle itſelf, at a late period, was miſtaken for hernia.

With reſpect to the treatment of hernia congenita, little is neceſſary, for at this early period it ſoon diſappears, and the inteſtine is retracted within the abdomen. All mechanical aſſiſtance therefore, by bandaging, is improper. The diſeaſe ſhould be left to time, and the part merely ſupported by the hand, when any increaſed preſſure takes place, from crying, or any other cauſe.

XVIII. Analogous to this original ſituation of the teſticles in the male, may be mentioned a peculiarity of the female, particularly conſpicuous at this time; viz. the

hymen. It conſiſts of a ſmall membranous expanſion, in the form of a creſcent, ſhutting up the entrance of the vagina. This membrane has been denied by many authors as ever exiſting. The late Dr. HUNTER uſed to obſerve that he never ſaw it wanting in a female fœtus; that it is the inaccuracy of the obſerver that prevents its detection. Its delicacy expoſes it at all times to accidental rupture; and we have very few inſtances of its remaining entire until the age of puberty: hence it can be no proper teſt of virginity, as was formerly imagined. In ſome rare inſtances, when it has remained entire at the age of puberty, morbid ſymptoms have occurred from this cauſe; for the menſtrual diſcharge being retained, comes to be collected in a quantity, that at laſt ſenſibly enlarges the uterus ſimilar to pregnancy. From external ſymptoms, it has been generally ſuppoſed, therefore, owing to pregnancy; and its ſymptoms conſiſting in down-bearing pains, ſuppreſſion of urine, &c. very much reſemble thoſe of abortion. It is only then to be detected by examination, when it is found commonly of a firm membranous texture. The ſymptoms of this complaint proceed gradually. The pains are felt, at firſt, only at each ſucceſſive return of the menſtrual period, when they go off, as the action of the uterus, neceſſary to this diſcharge, ceaſes. But their continuance, in a ſhort time, comes to be longer at each period, as the organ increaſes by diſtenſion, and at laſt they are conſtantly felt, occaſioning the moſt uneaſy painful ſtate. The removal of this diſeaſe is very ſimple: it conſiſts merely in dividing the membrane, by plunging an abſcefs lancet into its middle, which is to be carried for ſuch a length and depth as to allow a ſufficient opening for the diſcharge. This generally conſiſts of a dark

thick blood, reſembling in its appearance melted pitch. It poſſeſſes no fœtor or other ſymptom of putreſcency, in conſequence of its ſecluſion from the external air; and in ſuch caſes it has been diſcharged, even to the quantity of ſome pounds. The inciſion ſhould be healed over a piece of ſponge, and care taken to prevent a re-union of the parts, by keeping them divided, and that no excoriation may ariſe from the remains of the evacuation acquiring an acrimony in its diſcharge. For this purpoſe frequent injections ſhould be thrown into the vagina.

XIX. But, in ſome rare inſtances, it is not merely a membranous expanſion which is the cauſe of the obſtruction; the vagina itſelf ſeems filled with a ſolid fleſhy ſubſtance. The operation is here uncertain in its iſſue, and requires often a trocar to be paſſed for a conſiderable way up; of which a ſingular inſtance is related in the ſecond volume of the Medical Commentaries, where no leſs than four or five quarts of retained fluid was diſcharged, which had been collecting for a period of ſeven years.

XX. Along with theſe ſexual peculiarities may be mentioned the ſtate of the eye at birth. Viſion we find not ſo diſtinct then as afterwards. The pupil does not ſuffer ſuch a ready contraction, and the aqueous humour is rather in too great quantity, ſo as to render the form of the eye more convex. There is, even before birth, a peculiar membrane obſervable running acroſs the eye, which hides the pupil, and has a number of veſſels conſpicuous in it. This membrane, from its effect, is named the membrana pupillaris. It is deſcribed by HALLER and other authors; but thoſe fœtus in whom it is ob-

ſervable had not arrived at the term of geſtation. It is not diſcoverable after birth, ſo that its uſe we are ignorant of.

The ear, we find likewiſe, as well as the eye, imperfect at birth.

XXI. The breaſts of children of both ſexes, immediately after birth, it is remarkable, are found ſomewhat turgid, and contain a whitiſh or milky fluid. The cauſe of this we cannot explain. It generally departs, when left to itſelf, in a few days, and it ſeldom occaſions much uneaſineſs: nor ſhould any thing be done, as is too commonly the caſe, to remove the fluid by preſſure.

XXII. Thus we have conſidered the firſt diviſion of the fœtal peculiarities, or thoſe which are intended to adapt it to its ſituation during its uterine ſtate. In addition to theſe, it may be remarked that the nervous ſyſtem of the fœtus is larger in a proportion exceeding what afterwards takes place; that the veſſels poſſeſs the ſame over-proportion, which is, indeed, neceſſary for the facility of growth: hence, in children, the difficulty experienced in ſtopping hæmorrhage, after the ſimple application of a leech.

XXIII. We come next to conſider the ſecond diviſion of the fœtal peculiarities, or thoſe which are neceſſary to its ſafety in delivery. Theſe conſiſt in the connection of the more ſolid parts, and in the ſituation of ſeveral of the organs.

Connection of the Fœtal Solids.

XXIV. The firſt is diſplayed in the connections of the bones of the head; this is more neceſſary, as it forms

commonly the preſenting part, and as, by its preſſure, the paſſage is opened for the expulſion of the reſt. While then, in the adult, it conſiſts of ſix different bones, connected by ſutures or mutual indentations, inſtead of the latter, in the fœtus, its bones are not fully elongated, and therefore united merely by different membranous expanſions, the breadth of which is eaſily contracted by compreſſion. The chief of theſe expanſions connecting the parietal bones is the fontanelle or bregma. At the end of two years, this part, in a healthy child, is nearly oſſified. In delivery, where felt, it is eaſily diſtinguiſhed by the pulſation of the frontal ſinus; and it thus directs to a knowledge of the ſtate of preſentation *where it is doubtful.*

XXV. This mode of connection, which is ſo remarkably diſplayed in the cranium, we find alſo extended to the other bones. They are of a ſoft flexible nature, and looſely connected at their ſeveral articulations: hence, even where a good deal of force is exerted to bring down ſome of the extremities in præternatural labours, it is very rare that any accidents of fracture or diſlocation happen. As the head is intended to precede the other parts in delivery, the latter ſeem on this account ſomewhat contracted in their natural ſize: thus the cheſt is ſmaller than uſual in the fœtus; the pelvis too does not poſſeſs the common proportions it afterwards bears. With the ſame intention to avoid any injury happening to the organs during delivery, we find them all placed higher than afterwards; ſo that they may receive, in ſome meaſure, protection from the thorax: hence it is very rare, that when the head paſſes, the other parts of the body do not readily follow; and it is from this cauſe of the organs being all placed higher in the fœtal ſtate that

a præternatural ſituation of them is at times met with; for we cannot well trace it to any other cauſe.

Situation of the Fœtal Organs.

XXVI. The particular ſituation of the fœtal organs has been very accurately deſcribed by M. PORTAL of Paris, who, in a memoir to the Royal Academy of Sciences, has drawn a compariſon between their ſituation at this period and in more advanced life. From this memoir can be eaſily accounted for the frequent miſtakes of phyſicians with regard to the ſeat of diſeaſe in childhood. Thus the ſtomach, in infants, inſtead of being placed tranſverſely, as is the caſe in adults, hangs almoſt perpendicularly. By this means the ſituation of ſeveral parts of the inteſtines is different from what happens afterwards: the bladder of urine, in particular, is alſo much higher than in advanced life, being ſituated above the os pubis, and deſerves attention, for this reaſon; that when lithotomy, which is often the caſe in childhood, is unavoidable, the high operation ſhould, perhaps, be preferred, as the bladder will be more eaſily reached.

The ſituation alſo of the genital organs, in the female, at this period, differs ſomewhat from what takes place afterwards.

Changes at Birth.

XXVII. Theſe are the chief peculiarities of the fœtal ſyſtem, which fit it for its previous ſtate of exiſtence; on birth, however, a conſiderable alteration takes place; and that alteration depends on,

1. The change of its atmoſphere.
2. The change of its circulation; and,
3. The change of its nouriſhment.

1. *Of Atmoſphere.*

XXVIII. The change of the fœtal atmoſphere, at birth, may be conſidered as from 90, or 100, to that of our temperature frequently in winter under the freezing point; this change, therefore, cannot fail to be ſevere on the conſtitution of the child: it is alſo ſudden in its application, and inſtantly affects the lungs or internal parts; hence the uneaſineſs it creates induces the child to cry and to betray every mark of pain and diſtreſs. The application of heat, therefore, at this period, is highly proper, and deferring the neceſſary changes of dreſs, &c. is a neceſſary ſtep of precaution, till it is habituated ſomewhat to its new ſtate. Whether, at this period, the conſtitution of the child has a greater power of generating heat, to avoid the conſequences of this ſudden change of ſituation, has not been determined; nature, however, it is probable, has in this reſpect made ſome proviſion, not yet aſcertained, ſince we find children bear this ſudden alteration of temperature ſo well. On our part, every attempt ſhould be made to render the tranſition as ſmall as poſſible. The child ſhould be kept warm the moment it is received from the parent; the dreſs ſhould be looſe, warm, and eaſily adjuſted: preparatory to this, the firſt waſhing ſhould be with lukewarm water; nor ſhould the expoſure be long, nor any rough attempts made to ſeparate the mucus from the ſkin at once: it is a covering intended by nature to be only gradually removed; and when too rapidly done, both an unneceſſary expoſure of the child, as well as excoriation from the attempts, is liable to enſue.

2. *Of Circulation.*

XXIX. The change of its circulation muſt be equally ſevere on the child as the change of its atmoſphere. The

blood, which paſſed formerly in ſome degree independent of the lungs, and through which only one fourth part of their natural circulation was tranſmitted, ruſhes ſuddenly into them, and the coats of theſe veſſels become, of courſe, diſtended in a violent degree. That this change is attended with ſome difficulty, we know, becauſe, in many inſtances, the ſyſtem of the child is unable to accompliſh it, and the fœtal veſſels remaining in part open produces a ſtate of the circulation which proves fatal. Beſides the lungs, the circulation to the lower extremities is alſo increaſed, and a new acceſſion of blood paſſes through the iliacs, which alters the proportion of the internal and external arteries of that name. Until theſe changes in the circulation fully take place, as marked by the ſtopping of the pulſation in the umbilical cord, no ſeparation betwixt the mother and child ſhould be made. This change occaſions alſo the fluids of the fœtus, independent of the order of circulation, to acquire new properties, which they either did not previouſly poſſeſs, or but in a very ſmall degree; and the acquiſition of theſe properties muſt naturally give them more activity in pervading its veſſels, and farther to undergo the changes which ſecretion and excretion produce on them. Their acquiring theſe properties, however, muſt add to the uneaſineſs which the alteration of the fœtal circulation neceſſarily creates to the child.

3. *Of Nouriſhment.*

XXX. The nouriſhment of the child is a change equally important with the other two. In the fœtal ſtate it is nouriſhed by a fluid previouſly prepared, and already animaliſed; after birth, it is preſented with a fluid only in part animaliſed, but eaſily converted or aſſimilated

into this ſtate. This nouriſhment appears, as we have ſeen, *ſo* early as twenty-four hours after delivery; and this period is the time pointed out by nature for the application of the child. Its efforts, at firſt weak, to elicit it from the organ, are gradually increaſed, till it flows in a full ſtream; a neceſſary relief, as formerly obſerved, to the ſtate of the mother as well as the child. This nouriſhment differs ſomewhat in its ſpecific nature, or is peculiar to the particular claſſes of animals for which it is deſigned; hence the variety obſervable in the proportion of the principles which the milk of different animals exhibits. This nouriſhment does not, as during the fœtal ſtate, paſs directly into its circulation; it is received into organs formerly in a collapſed or inactive ſituation: theſe it diſtends; and by them, from their increaſed vitality or power of action, the conſequence of birth, it is fitted for entering the circulation in a complete animaliſed or nouriſhing ſtate.

XXXI. The appropriate circumſtances then neceſſary in this fluid, for the purpoſes of nouriſhment, are,

1. That it ſhould be ſuited to the particular claſs of animals for which it is deſigned.

2. That when received, it be in a healthy or proper aſſimilatory ſtate; and,

3. That it be ſupplied in quantity ſufficient to nouriſh the animal receiving it.

Of Milk.

XXXII. The firſt circumſtance leads to an inveſtigation of the milk of different animals, ſo as to eſtabliſh the peculiarities that diſtinguiſh it in the human ſubject.

In its external appearance, milk is a fluid of a beauti-

ful opaque white colour, nearly as limpid as water, and of a pleaſant emulſive taſte. This fluid, ſubmitted to chemical examination, is found to conſiſt of four different parts:

1. An oily or inflammable part, convertible into butter.

2. A coagulable part, convertible into cheeſe.

3. A ſaccharine matter, or ſugar of milk, termed the ſaccharine acid; and,

4. A proportion of common ſalt.

XXXIII. The proportion of nouriſhment derived from different kinds of milk appears clearly to depend on the quantity of their oily and ſaccharine parts; and the proportion in which theſe prevail in the milks of different domeſtic animals, is in the following ſcale:

Women's milk diſcovers moſt of the oily and ſaccharine matter.

Cow's milk has nearly the ſame proportion of oily but leſs of ſaccharine matter.

Goat's milk, in its proportions, is much the ſame.

Aſſes' milk is nearly equal to women's in its ſaccharine matter, but deficient in its oily part.

Sheep's milk exceeds women's in its oily part, but falls ſhort in its ſaccharine matter.

Mare's milk poſſeſſes little of the oily, but a great deal of the ſaccharine matter.

XXXIV. From this ſcale, the diſtinguiſhing quality of women's milk is an exceſs both of oily and ſaccharine parts, compared with the milk of other animals commonly in uſe; hence it conveys a more perfect nouriſhment to the child than the milk of other animals can beſtow.

XXXV. From this compoſition, then, milk may be properly conſidered as water, holding diſſolved in it a ſaline matter, approaching in its nature to ſugar, a very bland oil, and a coagulable fluid of the ſame nature with the coagulable part of the ſerum. By means of this the oil is mixed with the watery part, as it were, into an emulſion; and by mixing ſimilar ingredients artificially together, a very exact imitation of milk may be made. It is from the coagulable matter it derives its diſpoſition to curd by acids and heat. From the ſaccharine or ſaline matter it is diſpoſed to aceſcency; and, in ſome kinds of milk, this ſaline matter being more purely ſaccharine than in others, can be made to undergo the vinous fermentation.

XXXVI. The compariſon of milk with the yolk of an egg is ſanctioned by the ſimilarity of their nature. To the chick the yolk performs the ſame office as the milk to the child: it poſſeſſes a communication with the ſtomach of the chicken by means of the bag in which it is lodged, and ſupplies the animal with nouriſhment after it is hatched. On being diluted with water, it forms a fluid not unlike the milk, and can, on many occaſions, be ſubſtituted for it. It contains a leſs quantity of ſaccharine matter, which can be ſupplied by a ſmall addition of ſugar; and from its large proportion of coagulable matter, it can be employed to promote the union of more oil than what it contains with water: its proportion, however, of oily matter, is ſo great, that a conſiderable quantity can be procured from it by expreſſion.

XXXVII. From theſe circumſtances then, in the

variety of the milk of different animals, it is clear that every animal muſt be beſt nouriſhed by the milk of that ſpecies to which it belongs: any ſuccedaneum, therefore, for this, is incomplete; and where it is neceſſary to have recourſe to it, an imitation of the proper proportion of the principles of the milk peculiar to that ſpecies of animals ſhould always be made.

XXXVIII. We have thus conſidered the firſt circumſtance to be attended to in the nouriſhment of the child: the next, or that the fluid, whoſe general principles have been thus aſcertained, be in a healthy ſtate, is a point equally important.

In its natural ſtate, human milk poſſeſſes, we have ſeen, little of the caſeous part; of courſe, that a leſs proportion of it is liable to coagulation than that of other animals. The agents of coagulation we know to be heat and acids. In this proceſs of digeſtion the ſeparation of its coagulable part muſt, therefore, in a certain degree, take place, from the temperature in which it is placed, and the action of the gaſtric fluid, which poſſeſſes a little acidity. In many caſes, it would ſeem that the proportion of the caſeous part is greater than it ſhould be; and that, in conſequence, from the greater ſeparation of coagulum, digeſtion is in ſome degree ſuſpended, and the fluid is unfit for anſwering the purpoſes deſigned: in other caſes, the gaſtric fluid, though in health ſlightly acid, acquires, in conſequence of fever, or the weakened powers of ſtomach, a morbid acidity, which it communicates to the milk, and renders it unfit for the purpoſes of nouriſhment; hence, wherever milk ſeems to diſagree, and the nouriſhment of the child to be incomplete, an examination ſhould take place,

whether it depends on a faulty ſecretion in the fluid drawn from the mother, or in an impaired ſtate of the organ receiving it. The firſt may be judged of by an examination of the milk, and ſubmitting to chemical inveſtigation the proportion of the principles contained in it, which may be corrected, where deficient, by the regulation of the diet of the nurſe; the ſecond, when aſcertained, which is chiefly by the four evacuations, may be obviated by the uſe of alkalies and abſorbents in a proper quantity.

XXXIX. The third circumſtance neceſſary is the quantity in which the ſupply of fluid is requiſite for the child. This muſt be regulated particularly by the conſtitution and digeſtive powers themſelves. Thus, as in adults, though the quantity of nouriſhment requiſite for one child is much leſs than for another, in the choice of a nurſe an abundant ſupply is the point always to be aimed at: her general health, therefore, the particular appearance of the breaſt itſelf, and the age of the milk, as inſuring this ſupply, are eſſential circumſtances to be conſidered, when the mother does not nurſe, in the preference of a ſubſtitute.

XL, In this manner does nature proceed in ſupplying nouriſhment to the child. It firſt ſupplies it, as we have ſeen, by the powers of the mother alone; it is next drawn from the ſame ſource in a leſs perfect ſtate, in order to be completed by the organs of the child, which are now fit for this office; and as the progreſs of the child advances, and its organs are ſtronger, an additional ſupply becomes neceſſary from another ſource, to aid this more ſimple nouriſhment, which the mother has hitherto beſtowed. The particular time when this

addition is required, and the nature or quality of this addition, are ſubjects which have much divided the ſentiments of phyſicians, and require, therefore, attention.

Of Additional Food.

XLI. Judging from what nature points out, ſuch ſupply we ſhould conſider as unneceſſary until the teeth begin to appear, or ſuch inſtruments as are capable of preparing a different aliment. That this is the intention of nature there can be no doubt. Civiliſed life, however, has rejected the intimation, and this addition is begun at a much earlier period. Generally at the end of the firſt month, according to the beſt directions, a little boiled bread is added to the natural nouriſhment; and in doing this the bread ſhould be deprived as much as poſſible, by previous boiling in water, of its aſceſcent quality. At firſt this addition ſhould be ſparingly made, and only given once a day. No animal food, even in the lighteſt form, ſhould be allowed, until the child is able to walk.

When a proper number of teeth appear, the child is then capable of ſupporting itſelf on another aliment than this firſt ſupply from the mother; and it is, therefore, proper to withdraw it. The exact period, however, of this, or weaning, muſt be regulated by circumſtances of the child's conſtitution and progreſs.

The firſt, or natural nouriſhment, continues generally in abundant ſupply for a twelvemonth; and no appearances, commonly on the part of the mother, by a return of menſtruation, indicate that it ſhould be ſooner laid aſide. Before this, the ſupply of additional aliment ſhould be increaſed to the child, and its nou-

riſhment made as independent as poſſible of the fluid it is ſoon to want. When withdrawn, a ſomewhat ſimilar nouriſhment ſhould be ſtill continued, and the organs of the child not injured at firſt by a diet of difficult aſſimilation.

Weaning.

XLII. But even with the beſt management, the withdrawing the natural food, ſo long its accuſtomed ſuſtenance, or weaning, is attended with ſome ſlight derangement of the ſyſtem of the child. This is more apt to happen, as faſhion has now introduced its being withdrawn at a very early period, viz. in the 6th, 8th, or 10th month; and even ſome have given the length of doing it at 3 or 4. Nature, however, ſhould here be our guide, and extremes avoided. Before weaning takes place, the attention ſhould be directed to the child's taking of food, and the ſtate of his bowels. Whenever he is capable of the former, and no irregularity prevails in the latter, it may be ſafely done; and that by putting ſomething diſagreeable on the nipple, as ſoot or aloes. If, in the courſe of it, diarrhœa enſue, it is to be treated as directed under the head of this particular diſeaſe, viz. diarrhœa and gripes; and particular regard paid to the choice of the particular food which ſeems to agree beſt with the child.

XLIII. This is the uſual progreſs where regular nurſing takes place, or when the mother herſelf, or a ſubſtitute, gives the natural fluid appointed for the nouriſhment of the child; but when circumſtances do not admit this ſupply coming from the human ſubject, and

children are reared by the hand, a close imitation of this plan is still requisite in order to its proving successful.

Bringing up by the Hand.

XLIV. This imitation consists in rendering the fluid received from other animals as nearly in the portion of its parts the same as human milk.

To render it also more animalised, and deprive it of ascescency, a small mixture of a light jelly should be added; and to increase its saccharine part, the characteristic of human milk, some sugar may also be put to it. It should be given in a luke-warm state, or in the natural temperature as received from the animal: and it is further improved by previous boiling, so as to lessen its laxative tendency. The proportion of these additional ingredients, to fit it for the nourishment of the child, must depend on the milk of the particular animal employed. Cows' milk is generally used, and it requires the greatest proportion of them; but, in weakly states of body, asses' milk should be preferred.

XLV. Various instruments have been made use of to administer this supply: the forms of these may be seen by consulting the different authors who have written on this subject. The easiest mode of application should be preferred, and the pot is therefore most generally employed.

XLVI. By this artificial mode of rearing children, the same degree of nourishment is not exactly conveyed as by the human milk: an additional supply of other aliment, therefore, becomes sooner necessary, and the

organs of the child, accuſtomed ſooner to exert their powers in preparing this artificial nouriſhment, are ſooner able to receive that of a different kind. This addition ſhould conſiſt of light animal ſoups. This change may be begun at four or five months, and the ſoup ſhould be joined with a mixture of bread, once a day; and it may be alſo alternated with bread and milk. When further advanced, light ſolids, in the form of pudding, may be next permitted; and, when teeth are once acquired, animal food may be given in a ſolid form, though in a ſparing manner.

Sleep and Watching.

XLVII. In this way is the child to be reared to the period of weaning; but, beſides its nouriſhment, other circumſtances are to be attended to in conducting it to this period. Theſe are with reſpect to its ſleep, and watching.

The child at birth, in coming from the paſſive fœtal ſtate, has a natural tendency to doſe or ſleep much: this, perhaps, ſhould rather be favoured, being the effect of the important changes which take place in its ſituation when uſhered into the world. All children, therefore, in health, ſleep much during the firſt four days, or even longer, unleſs prevented by diſeaſe. In the fœtal ſtate, children are ſuſpended in a fluid, or kept in a certain buoyancy or motion: this points out, that, while awake, they ſhould be kept much in motion, or exerciſed in the arms of an attendant; and alſo, while in ſleep, that the ſame motion ſhould be imitated by the uſe of a cradle. The propriety of this active ſtate is pointed out by the nature of the infantine conſtitution, which, from the minuteneſs of its veſſels, and their ſtrong tendency to

accumulation along with the exceſs of fluids always abounding in their ſyſtem, requires every aid of exerciſe to diſſipate their ſuperfluous parts.

XLVIII. We have thus conſidered the general principles to be adopted in conducting the management of children, during the period of nurſing, or the firſt twelvemonth of their exiſtence. Though by this management, ſtrictly obſerved, many diſeaſes may be prevented, yet as theſe, under certain circumſtances, will unavoidably riſe, it is next proper we ſhould inveſtigate the various diſeaſes to which infancy and childhood are ſubjected.

DIVISION II.

Diſeaſes of Infancy.

XLIX. The diſeaſes of children admit different arrangements. The moſt uſeful in practice is that which conſiders,

1. Thoſe diſorders which are the immediate conſequence of birth; and,

2. Thoſe that ariſe from conſtitutional or accidental cauſes.

To the firſt diviſion belong all the affections within the month, and likewiſe all the congenite diſeaſes.

To the ſecond the various maladies of a conſtitutional and ſpecific nature.

L. The cauſes of infantine diſeaſe may be referred to three heads:

1. Conſtitutional laxity and irritability.
2. Improper diet; and,
3. Want of exerciſe.

LI. The firſt of theſe is the natural foundation of the future growth, and of the neceſſary changes that are afterwards to enſue; it is therefore to be conſidered *only* as a cauſe of diſeaſe, when, by deviation from nature in the rearing of the child, it is attended with morbid effects. The morbid effects of this cauſe are chiefly to be prevented by the uſe of the cold bath. It ſhould be begun with to every child by the time it is three months old; and continued every morning from that period, except in caſe of diſeaſe, until it is four or five. In doing it, one dip is ſufficient; and proper friction ſhould be employed afterwards, until the natural glow is reſtored.

LII. Improper food is one of the moſt frequent cauſes of infantine diſeaſe; and as all faults of digeſtion in children conſiſt either in the production of a tenacious ſlime or morbid acidity, the means pointed out are evident when affections ariſe from this cauſe.

LIII. Want of exerciſe in civiliſed life is the frequent ſource of diſeaſe in infancy. The young of all animals take much exerciſe; and nature points out the deſire for it, in order that a regular ſecretion and excretion may at this period proceed for a proper and uniform growth. Every part alſo acquires ſtrength and vigour in proportion to the exerciſe it receives: when exerciſe, therefore, is neglected at this time, glandular affections muſt naturally enſue, the foundation of which is laid in that very ſtate of conſtitution eſſential to growth.

LIV. From theſe three cauſes, then, viz. from the natural infantine habit itſelf, from improper diet, and from want of exerciſe, we conſider all the diſeaſes to which childhood is ſubjected as ariſing.

From the firſt, they are diſpoſed to all the acute diſeaſes, particularly thoſe of a ſpecific nature; and from the two laſt, combined with it, to all the affections of the primæ viæ, of the ſkin, and of the glands, which are ſo frequent at this period.

LV. The diſeaſes of children are often difficult to diſtinguiſh. The pulſe affords no proper criterion; for its quickneſs precludes examination. Their temperature alſo affords only an uncertain information. Their general health is to be judged of chiefly from the ſtate of the fontanels and ſkin.

If the former are too looſe and ſeparated, they mark diſeaſe.

If the latter is relaxed, particularly the ſkin of the ſcrotum, and not corrugated, there is then a morbid ſtate of habit exiſting.

Incomplete Animation.

LVI. The firſt affection to be noticed at birth is what may be termed incomplete animation, and is either general or partial.

The firſt comprehends two ſpecies, varying in degree, viz. fainting, or ſyncope, and ſtill birth.

Fainting.

LVII. Fainting is a very rare occurrence, but has been known to take place. A feeble pulſation of the heart is ſtill felt during the fit.

The treatment conſiſts in the uſe of volatiles, the ſame as in the adult: thus a few drops of volatile tincture of valerian may be given every two hours till recovery takes place.

Still-Birth.

LVIII. Still-birth is a more frequent occurrence. The animation is here ſo ſmall as hardly to betray any appearance of it: we are not, however, from theſe ſmall appearances, to ſuppoſe it entirely extinct. Under theſe circumſtances, moſt unexpected recoveries have taken place; and the ſuppoſition of the total extinction of life will often prevent the proper means being employed, or at leaſt perſevered in. In a former volume, we deſcribed all the ſymptoms of the extinction of life previous to birth; and pointed out their uncertainty. In the ſame way, after birth, unleſs actual appearances of putreſcency prevail, no ſymptom can be depended on but the real experience of the inefficacy of the means employed for reſtoration after a reaſonable time; for in the child, at birth, the vital principle is particularly apt to be ſuſpended from its natural imperfect animation; and where only paleneſs of the body, lividity, coldneſs, and want of reſpiration, are the prevailing ſymptoms, every effort ſhould be employed to render its animation complete.

LIX. The propriety, however, of immediately inflating the lungs, has been called in queſtion, and with ſeeming juſtice, by ſome authors, till animation is ſomewhat reſtored.

The fœtal life, it is clear, does not require for its continuance the proceſs of reſpiration, but a freedom of circulation through the organs already in uſe: the reſtoring, therefore, the circulation, by the means already pointed out, ſeems the primary indication; and the proofs of its reſtoration will appear by the bleeding of the cord, and the glow of colour on the lips and countenance. When this is once obtained, inflation of the lungs may then be attempted, to render the animation complete.

LX. A frequent cauſe of ſtill birth, alleged by ſome authors, is the filling up the fauces and trachea with the liquor amnii or mucus previous to birth.

This collection of the liquor amnii is generally removed by the action of labour; but when this does not completely take place, it may prove an impediment to the exerciſe of the functions at birth; and its exiſtence, therefore, is always to be had in view before other means are employed.

LXI. The different means employed to recover this ſtate are; firſt, warmth, as covering the child with warm cloths, and uſing the warm bath; and, ſecondly, exciting the action of ſome of the principal organs, particularly the lungs, primæ viæ, and umbilical circulation.

The firſt is performed by blowing forcibly into the trachea or windpipe, and then expelling it again from the lungs, by preſſure againſt the diaphragm and breaſt: ſtimulating the noſe and throat with a feather, &c.

The ſecond conſiſts in the uſe of warm glyſters into the rectum, particularly of tobacco-ſmoke.

The third depends on immerſing the placenta in warm water, and forcing the blood through it into the circulation of the child.

In addition to theſe means, friction of the ſurface with ſtimulants is to be joined, alſo forcibly ſtriking the ſoles and nates.

LXII. The partial ſpecies of this diſeaſe, or of incomplete animation, conſiſts in a diſcolouration of the face and extremities, often of the whole ſurface. This diſcolouration is either the effect of preſſure in delivery, or, without this, of mal-conformation, and an interruption taking place in ſome parts of the circulation. The parts

in this caſe are firſt black, then change to a leaden colour. At times this appearance is very partial; at other times it is more general. In ſome caſes it is temporary; in others recurrent.

LXIII. Our prognoſis is determined by its appearance as a temporary affection; and, if recurring, by its not ſhowing the ſame deepneſs of tinge as at firſt; for, where this laſt prevails, it is generally fatal.

LXIV. The treatment lies in promoting a freedom of circulation to the ſkin by heat, and exciting the action of the primæ viæ.

The firſt is done by gently chaffing the affected parts before the fire.

The ſecond by the exhibition of a glyſter, or the exciting vomiting.

Where very partial, the application of a leech may remove the accumulation.

Red-Gum (Strophulus Intertinctus).

LXV. The red-gum is an efflorescence of ſpots, varying in their ſize and appearance, confined to the ſuperior parts of the body, particularly the face, cheeks, and neck, fore arms, and back of the hands; but frequently extending alſo in its progreſs over the whole ſkin. They are generally, though not always, preceded by ſome diſorder of the ſyſtem. They are commonly alſo attended with coſtiveneſs.

LXVI. The varieties of their appearance are either ſmall ſpots, puſtules filled with a limpid or ſtraw-co-

loured ſerum, which dries, turns horny, and ſcales off; or it ſhows itſelf in ſmall points, like pin-heads, of a pearly colour, and opake.

LXVII. The duration of this affection is uncertain. It continues often permanent for a conſiderable time; or, if tranſitory, is ſucceeded by repeated appearances of the ſame kind, the ſucceſſions of which vary in the exact period of their intervals.

LXVIII. A ſpecies of this diſeaſe, termed the white-gum, deſerves to be noticed merely from the difference of its appearance; but, as forming nothing ſpecific in its nature, nothing further occurs in its treatment.

LXIX. This diſeaſe is ſuppoſed merely the effect of the external air or friction of the clothes producing a ſtrong determination to the ſkin. It appears indeed, in ſome children, coeval with birth; in others not till ſome days or weeks after. Thus it would appear rather the ſymptom of an internal acrimony affecting the ſurface of the primæ viæ, and from the ſympathy between the two ſurfaces thrown out on the ſkin.

Hence the two diſeaſes of gum and aphthæ appear to alternate with each other.

LXX. For the cure of this diſeaſe, two indications preſent themſelves:

1. The treatment of the external ſurface itſelf; and,

2. The removal of the internal acrimony, for the moſt part connected with it.

The firſt depends on a proper application of heat, ſo as to prevent the ſudden diſappearance of the diſeaſe,

or its being thrown in upon the internal parts; the 2d on the uſe of abſorbents and laxatives.

Where any uneaſy ſymptoms of ſickneſs or depreſſion ariſe before this removal takes place, gentle cordials, the uſe of the ſemicupium, and attention to the temperature of the atmoſphere, will be effectual in overcoming it.

Retained Meconium.

LXXI. An accumulation of the meconium, or bile, in a highly animaliſed ſtate, precedes birth; and, when not diſcharged after it, is productive of various complaints, as indigeſtion, flatulence, pain, &c. often aſcribed to a different cauſe.

LXXII. The ſeat of this matter is the larger inteſtines, and the other parts of them are almoſt entirely free of it; it is therefore from its action here, or its being found in one part, it is more apt to produce ſuch morbid ſymptoms than if it were more diffuſed.

LXXIII. Its diſcharge, therefore, takes place as a natural proceſs during the firſt days after birth, from the increaſed ſenſibility of the inteſtines acquired by the changes then ariſing, and perhaps alſo from the admixture of this matter with atmoſpheric air then admitted to it, which mixture alters its former animaliſed ſtate. Where ſuch change, however, either on the parts containing it or the ſecretion itſelf, does not enſue, from its being retained, it becomes the object of medicine to relieve it.

LXXIV. This is done by the uſe of laxatives, of which a proper ſelection is neceſſary.

The moſt natural laxative is the milk, which at firſt is allowed to poſſeſs this quality; but where the milk is ineffectual for this purpoſe, then ſyrup of roſes or of buckthorn, given, diluted in gruel, by tea-ſpoonfuls, will anſwer the purpoſe; or a little honey in whey; or a ſlight infuſion of rhubarb; or a few drops of antimonial wine, much diluted.

LXXV. Though theſe means are generally ſufficient, yet, in many inſtances, more powerful ones require to be had recourſe to; but, previous to it, the uſe of injections ſhould be tried, and the removal of part of the meconium in this way will often give an action to the bowels, which occaſions the reſt to be ſoon diſcharged. Should theſe attempts fail, from ſome peculiar torpor of habit, then ſenna, jalap, or calomel, or ſome of the more powerful or draſtic medicines, will then be unavoidable; though much obſervation and caution are neceſſary to direct their proper doſe.

LXXVI. As the cauſe of children's complaints are, at this period, often miſtaken, to know whether ariſing from the preſent ſource, particular attention ſhould be paid to the ſtate of the diſcharge from the time of birth; and unleſs a proper evacuation of the meconium has appeared, the morbid ſtate is clearly the effect of retention.

Jaundice (Icterus Infantum).

LXXVII. The icterus infantum is diſtinguiſhed by the ſame yellow colour of the ſkin as in the adult, though in infants the nails are remarked to be free from its tinge. In its progreſs, when continuing ſome

weeks, the yellow deepens, or changes to an orange colour.

LXXVIII. It is attended alſo with the ſame lethargic ſtate as in the adult; but it is here particularly dangerous, from the child being unable to ſuck. It ariſes from viſcid matter obſtructing the mouths of the biliary ducts, ſeldom from the meconium; and this viſcid matter therefore may be combined either with obſtructed meconium or not.

LXXIX. This diſeaſe has been remarked as more frequent to the children of ſome countries than others. It is not apt to be received before birth; but it can be communicated from the mother to the child during the period of nurſing.

LXXX. The cauſe of infantine jaundice is much the ſame as in the adult; but, by being of a milder nature, it requires a leſs complicated treatment.

An emetic may be given; and the ipecacuanha is here preferable, in a doſe of three or four grains, as being more certain in its operation than the antimonials. The emetic may be ſucceeded by a laxative, and a few grains of rhubarb are the beſt form of it. The repetition of this plan every two or three days will be ſufficient to effect a cure; but, if the diſeaſe ſhould continue obſtinate, ſaponaceous medicines may then be had recourſe to.

Eryſipelas (Eryſipelas Infantilis).

LXXXI. The infantine eryſipelas conſiſts of blotches, various in their appearance, and rapid in their pro-

greſs, acquiring ſoon a purpliſh or leaden hue, becoming exceedingly hard, and tending frequently to mortification.

LXXXII. Its attack is generally a few days after birth, ſeldom exceeding the month, though ſometimes later; and at times its attack has been known to precede birth.

LXXXIII. The ſituations it occupies are various, as every part of the body is occaſionally its ſeat; but its violence is always in proportion as it departs from the extremities, or affects the trunk and ſuperior parts.

LXXXIV. In diſſections of this diſeaſe, where fatal, a ſimilar ſtate of the inteſtines is diſcovered; and the external inflammation, therefore, is probably merely a conſequence of the internal inflammation.

LXXXV. This diſeaſe is commonly very quickly fatal, and that in a few days. Various methods of treatment have been purſued; but the tonic plan, combined with an antiſeptic local treatment, has been the moſt ſucceſsful.

The beſt tonic is a decoction of the bark, with aromatics, given frequently,

To the parts, compreſſes, dipped in camphorated ſpirits, are the moſt ſucceſsful application.

In ſpite of all, however, it is a diſeaſe frequently experienced fatal.

Ulcerous Noſtril (Ozena Infantilis).

LXXXVI. The ozena of infancy is diſtinguiſhed by a

discharge of matter from the nose, first purulent, and then sanious; a purple-streaked eye-lid towards its verge; a difficulty of breathing, particularly in sleep; and an external fullness of the throat and neck, discovering, on inspection internally, the tonsils tumified, of a dark red hue, with ash-coloured specks, frequently ulcerations.

LXXXVII. This disease appears with various degrees of violence, and is therefore differently described by authors. Its progress is generally rapid. Dissections afford little information on its nature; and the fatal termination, after some days' increasing debility, takes place either by the attack of convulsions, or the increasing debility itself preventing altogether sucking or swallowing.

LXXXVIII. From the apparent symptoms, the use of tonic and antiseptic medicines seems particularly indicated. The bark should be given in decoction or glyster, joined with cordials. The same remedies should be exhibited to the wet-nurse. The acrimony of the discharge on the adjacent surfaces of the nose and throat should be prevented by antiseptic washes, and by a favourable position of the child for its external discharge. Blisters are improper, as tending to produce gangrene of the part.

Aphthæ (Thrush).

LXXXIX. The thrush is an eruption of spots, appearing generally about the third week, or within the month, on the lips and inside of the mouth, which con-

tinues to ſpread, and at times affects the whole of the alimentary canal, appearing externally at the anus.

XC. This diſeaſe, from its appearance, is of three ſpecies; the white, the red, and the black.

XCI. The white or mild ſpecies is generally preceded by an inclination to doſe or ſleep. It appears ſpreading thinly over the lips and tongue, in the form of white curdy ſpecks, which do not increaſe after two or three days. They then turn yellowiſh and brown, which is generally in ſeven or eight days, when they depart; after which, the ſame appearances are apt to be ſucceſſively renewed.

XCII. The ſecond ſpecies, or the malignant, is marked by ſpots of a darker colour, and are more extended than the former. It is alſo often combined with a ſpecies of eryſipelas, and accompanied with ſome degree of fever, griping or ſour green ſtools, &c.

XCIII. The third or black ſpecies is very uncommon, and may be conſidered as an aggravated ſpecies of the ſecond.

XCIV. This diſeaſe is not properly attended with fever as a primary ſymptom; but it frequently ſupervenes in its progreſs, when the eruption is extenſive, and ſymptomatic of ſome other affection. Along with the fever, there is alſo frequently griping or looſe ſtools, of a watery or ſour green colour.

XCV. The cauſes of this diſeaſe are evidently morbid

acidity or indigeſtion, when occurring as a primary diſeaſe, in which form it appears within the month, and then it may be conſidered as the effect of improper diet and confined ſituation.

XCVI. The prognoſis to be formed in this diſeaſe depends on its particular ſpecies. The malignant ſpecies is very often fatal, and has been known to appear in many places of an epidemic nature.

XCVII. The treatment of this diſeaſe depends on correcting the ſecretions of the primæ viæ, and obviating the topical affection of the part.

The firſt is generally begun with an antimonial emetic, and a few drops of the antimonial wine is preferred for this purpoſe. Abſorbents are then to be had recourſe to; and as the ſcaling takes place, purgatives, as a few grains of rhubarb, will produce their diſcharge. By a regular repetition of this plan, the diſeaſe will be removed; and, to obviate its effects, bitters may be exhibited afterwards, as a few drops of chamomile, or gentian infuſion, or tincture.

The ſecond indication, the topical treatment of the part, is executed by the application of aſtringents in various forms: the chief of theſe are the borax and diluted mineral acids, united with an aſtringent. Thus: the borax and ſugar, in the proportion of one to ſeven, is an uſeful powder: honey acidulated with elixir of vitriol, or muriatic acid, or united with borax in the proportion of ʒſſ. or ʒi. to the ℥i.; or elſe the infuſion of red roſe-leaves acidulated with mineral acids, or mixed with honey.

XCVIII. When the thruſh is of the worſt or black ſpecies, an early exhibition of antiſeptics will be proper; and the bark ſhould be employed fully for this purpoſe.

Skin-bound.

XCIX. The diſeaſe termed ſkin-bound is a peculiar affection, diſplayed in a yellowiſh white colour of ſkin, its tightneſs or fixed ſtate to the parts below, and its hard reſiſting feel, particularly on the face and extremities. To theſe ſymptoms are joined coldneſs of the child, its apparent pain, and death-like appearance.

C. This diſeaſe is uncertain in the period of its appearance, and ſhows itſelf either as an original affection, or as combined with a morbid ſtate of the bowels. It is generally fatal on the third or fourth day from birth, and ſeldom protracted beyond the ſeventh.

CI. It is more frequent in ſome countries than others; and it has particularly claimed the attention of the French phyſicians, by whom it is regularly deſcribed.

CII. The cauſes of this diſeaſe are ſomewhat uncertain: but it has been referred to an endemic ſource, and therefore chiefly appears in hoſpitals. It is very frequently fatal, unleſs the timely application of means are had recourſe to.

CIII. Diſſections of this diſeaſe ſhow conſtantly a ſerous extravaſation of a deep yellow colour, an accu-

mulation both in the liver and lungs, and affections of the lymphatic ſyſtem, particularly the glands of the meſentery.

CIV. The treatment of this diſeaſe depends on the removal of the ſpaſm, or contracted ſtate of ſurface, and reſtoring at the ſame time the health of the bowels and inteſtines. This may be moſt readily effected by the uſe of the warm bath, and friction externally, alſo bliſters; and internally by attention to the exhibition of carminative medicines, particularly the uſe of the volatile alkali, and antiſpaſmodics, calomel, or other laxatives, if neceſſary, being firſt premiſed.

CV. The rigidity in this diſeaſe exiſts in various degrees: at times it affects the ſubjacent muſcles as well as the cellular membrane; thus the lower jaw has been affected with tetanic ſymptoms. A variety of anomalous ſymptoms alſo at times take place; as the preſence of infantine eruptions, ending in gangrene of certain parts, difficulty of ſwallowing, or with extreme pain, &c.

Convulſions (Convulſiones).

CVI. The convulſions of children are generally preceded by ſlight ſymptoms of diſtortion of the face, as involuntary laughter when aſleep or awake, ſquinting of the eyes towards the noſe, or turning them upwards, the child at the ſame time changing to a blueiſh colour.

CVII. The fit itſelf is diſtinguiſhed by diſtortions more or leſs general, according to the violence of the attack. Theſe diſtortions are either of the members in ſucceſſion, or of the body all at once. They are attended with the uſual ſymptoms of foam or frothy diſcharge from the mouth, and they are terminated by profound ſleep, from which the child awakes unconſcious of its former ſtate.

CVIII. The repetition of theſe fits depends on the violence of the cauſe; and after two or three fits, on ſucceſſive days, a longer interval often takes place.

CIX. This diſeaſe is always ſymptomatic; and the particular irritations producing it are, the meconium, teething, and worms.

CX. Its attack from the firſt cauſe is generally immediately after birth; and it appears under two forms of the lock-jaw, or Triſmus Infantilis, and inward fits.

Lock-Jaw (Triſmus Infantilis).

CXI. The Triſmus Infantilis conſiſts in various degrees of rigidity affecting the under jaw, ſometimes the muſcles of the face, producing a peculiar fixedneſs of feature; and at other times extending over the neck and the whole body, with various concomitant ſymptoms.

CXII. Its appearance is generally from the ſixth to the ninth day; and it is peculiar to the children of ſome countries more than others.

CXIII. It depends on fixed ſpaſm of theſe parts, and it may be conſidered as the ſame morbid ſtate that affects the adult, only varied by the particular circumſtances of infancy.

CXIV. From its more frequent appearance in ſome countries than others, it muſt depend on ſome ſpecial cauſe there exiſting; and this cauſe we muſt naturally refer to the action of the external atmoſphere in theſe ſituations, under the circumſtances of the extreme irritability which ſucceeds birth. As the retention of the meconium, alleged by authors, frequently occurs without the attack of this diſeaſe, it does not therefore form a ſpecial or appropriate cauſe; but the irritation of the external atmoſphere, under particular combinations with which we are unacquainted, may be ſufficient for this effect.

CXV. The prognoſis to be formed of this diſeaſe is generally unfavourable, and the diſeaſe is alſo rapid in its iſſue: it is not, however, very prevalent in this country; in the warmer climates, the fatality from this affection is great.

CXVI. The treatment here, as in the adult, depends on removing irritation, and relaxing the ſpaſm.

The firſt is executed by clearing out the inteſtines from the meconium, an active ſource of irritation at this time.

The ſecond conſiſts in the uſe of the warm bath, in friction with oils, anodynes, and ſtimulants, to the part; in the application of bliſters near the ſeat of the diſeaſe; and in the uſe of cordial and tonic remedies in-

ternally, as in the uſe of diluted ſpirits, wine, ol ſuccini, &c.

Inward Fits.

CXVII. The ſymptoms which diſtinguiſh this ſecond form of early convulſions, termed inward fits, are, a little blueneſs of the lips, ſlight turning up of the eyes, and a peculiar ſound of voice, with quick intervals of breathing.

CXVIII. Theſe ſymptoms are moſt ſevere in ſleep, when they are often attended with an appearance of ſmiling, or elſe an expreſſion of grief and pain. They are aggravated by ſucking and feeding, or by whatever produces exertion or ſurpriſe; and they gradually increaſe in violence till the actual epileptic form is aſſumed.

CXIX. The cauſes of this diſeaſe are uncertain, though the ſtate of bowels has been noticed.

CXX. The treatment conſiſts in the uſe of an emetic, ſucceeded by volatile and fœtid medicines; though this method is generally unſucceſsful in their cure.

CXXI. Theſe are the two forms of early convulſion: the laſt or proper form belongs to a more advanced period, to be afterwards conſidered.

Abdominal Complaints.

CXXII. The chief abdominal complaints that attend infancy are wind and coſtiveneſs: and theſe complaints

assume various symptoms, from simple griping pain and crying, drawing up the legs and scrotum to the height of actual spasm, and convulsions.

CXXIII. Such complaints are often hereditary, and may be traced in the mother; a mark to detect their origin in the child.

CXXIV. This state of the bowels, where apparently hereditary, must be counteracted by gentle means; and only where assuming a real violence of symptoms, is a strong use of laxatives to be had recourse to.

CXXV. In counteracting this morbid state, three circumstances come into review as present:

1. The slow state of the bowels themselves.
2. A tendency to the generation of wind; and,
3. A degree of morbid acidity combined with them.

CXXVI. In the choice of laxatives, therefore, to answer this view, absorbents and aromatics must be combined; and if the costiveness, the leading indication, is removed, the tendency to the other symptoms must be prevented by a further use of absorbents and aromatics, in a mild form.

CXXVII. When the morbid symptoms are so violent as to demand more immediate relief, a dry glyster, or suppository, made of Castile soap, mallow or beet root, is preferred; or else senna-tea, and some of the drastics.

CXXVIII. Where the wind creates much pain, the

application of external heat, either dry or by fomentation, will be uſeful as a temporary relief.

CXXIX. Much attention is alſo neceſſary to the food in counteracting theſe ſymptoms.

Watchfulneſs (Pervigilia).

CXXX. Watchfulneſs is, on many occaſions, a ſpecies of diſeaſe in infants; and ariſes from two cauſes,—abdominal complaints, or improper regulation of the ſleep through the day.

CXXXI. In the firſt caſe, the chief point is to aſcertain the cauſe; when the remedies recommended under the laſt diſeaſe may be employed according to the particular ſtate of the bowels then prevalent.

In the ſecond, its prevailing only in the night will in part demonſtrate the cauſe, and point out the remedy.

Vomiting (Vomitus).

CXXXII. Vomiting in children is ſeldom an idiopathic diſeaſe; it is generally a conſequence of ſome other morbid ſtate.

CXXXIII. In judging of this ſymptom, a difference is to be made between real vomiting, and what may be termed the ſimple unloading of the ſtomach.

CXXXIV. The latter is often the attendant of health and repletion. It takes place in a very few minutes after ſucking, and ſo ſoon as the gaſtric fluid has begun to act upon the contents of the ſtomach. It is accompanied with no ſickneſs, or apparent unhealthy ſtate,

and ſhows merely that the quantity received is too great to allow the proceſs of digeſtion to proceed, and the organ is therefore ſtimulated by it to unload itſelf of part, when its uſual operations are reſumed.

CXXXV. No particular treatment or interference is here proper; Nature herſelf removes the accumulation, and the effect ceaſes on the diſperſion of the cauſe; though ſome time ſhould elapſe before allowing the organ to be again filled.

CXXXVI. Real vomiting, then, always ſuppoſes a ſtate of diſeaſe or derangement; it is a very common complaint during the firſt and ſecond week; and this derangement depends on ſeveral cauſes, as,

1. *Predominant* acidity.
2. Morbid irritability.
3. Suppreſſed cuticular eruption; or,
4. Interrupted diſcharge from ſome part.

CXXXVII. With reſpect to the firſt, it is often characteriſed by the ſmell of the matter thrown up, as well as the greeniſh or clayey colour of the ſtools.

CXXXVIII. In regard to the ſecond, it is very apt to occur in very delicate puny children, or who are otherwiſe unhealthy.

CXXXIX. The ſudden ſuppreſſion of any eruption is always attended with an affection of ſtomach, often ſucceeded by general fever; and in the ſame way, when any diſcharge has prevailed, its diſappearance is apt to be followed by the ſame ſymptoms.

CXL. In counteracting, then, this morbid ſtate, the particular cauſes of it are to be had in view.

CXLI. In the firſt caſe, the uſe of abſorbents and alkalis are particularly indicated, as the teſtaceous powders, magneſia, the aqua kali, or ſoap.

CXLII. Myrrh alſo has been found an uſeful remedy.

CXLIII. In the ſecond, tonics and aromatics form the proper remedies; as an infuſion of bark, or of chamomile, with the junction of ginger, orange-peel, or a little rhubarb; and occaſionally an anodyne.

CXLIV. The ſame remedies alſo, in the form of external application to the region of the ſtomach, as an aromatic fomentation, or the emplaſt. ladani, with theraica, may be attempted.

CXLV. In all caſes of vomiting, the exiſtence of hernia ſhould be inveſtigated.

Inflammation of Stomach (Gaſtritis Infantum).

CXLVI. The gaſtritis infantum is a rare diſeaſe, and diſtinguiſhed by great pain in the region of the ſtomach, very frequent in its recurrence, and marked by violent contortions or writhings, and the application of the child's hand to the part.

CXLVII. When it occurs, it is generally in ſum-

mer. During its continuance nothing is retained, but immediately rejected. It is not, however, so fatal in children as in adults.

CXLVIII. The treatment consists in the use of cooling and laxative remedies, as the castor oil, lettuce-juice, &c.; but, where symptoms are very violent, external fomentations, the warm bath, or a blister to the part, may be attempted.

Gripes (Tormina).

CXLIX. Gripes are always the attendant of wind, costiveness, or diarrhœa; and therefore entirely symptomatic. Their treatment cannot be disjoined from that of the primary affection with which they are connected. Alteration of posture, so as to keep the child upright, is frequently an alleviation of their violence.

Looseness (Diarrhœa).

CL. Diarrhœa is one of the most frequent complaints of infancy; and one which, unless severe, is hardly to be considered in children as a real morbid state. By it, nature, with them, most commonly throws off any offending cause. Its causes, therefore, and treatment, require very particular attention.

CLI. The general treatment of this complaint consists in first removing, as far as possible, the of-

fending matter, and then checking the particular ſymptoms.

CLII. The firſt of theſe is effected by the exhibition of an emetic, where the offending cauſe appears lodged in the ſtomach; and afterwards by the uſe of rhubarb and abſorbents. The extent and continuance of this plan muſt depend on the obſtinacy of the complaint. To theſe medicines opiates muſt be occaſionally added, according as particularly indicated by pain and irritation. In fixing the doſe of opiates with reſpect to children, ſome nicety is required; though, in general, they bear them proportionally better than adults.

CLIII. The particular nature of the diarrhœa is to be often drawn from the appearance of the ſtools, and the treatment to be regulated from that circumſtance. Thus, when the ſtools are ſour and curdled, and the ſymptom of hiccup occaſionally attends, the propriety of abſorbents, joined with aromatics, is ſtrongly pointed out, as the magneſia, with a little nutmeg.

CLIV. When, again, the ſtools are ſlimy, and green or white, and of a clayey colour, alkalis may be added to the former plan, as the aqua kali, or a little diſſolved ſoap, in clyſter.

CLV. When the ſtools are watery and bloody, or at times fœtid, the exhibition of a powerful purgative ſhould precede the other treatment; and, if attended with much griping, cordials, and clyſters of warm milk, may be alſo repeated.

CLVI. Beſides this internal treatment, external applications are had recourſe to as an auxiliary aſſiſtance. Theſe conſiſt of fomentations with brandy, with chamomile-flowers, white poppy-heads, &c.

CLVII. Two particular ſpecies of diarrhœa claim a ſpecial conſideration: theſe are the *dentile*, and what are termed *watery gripes*.

CLVIII. The *dentile* ſpecies, or from teething, is frequently attended with pale ſtools, curdled and watery; and is moſt ſevere on cutting the double teeth. It is alſo accompanied with fever, which increaſes if the complaint is ſtopped.

CLIX. As it is here the effect of a general irritation of the ſyſtem, not eſpecially confined to the bowels, the indications pointed out are, to take off this general irritation by frequent purging, and more certainly where the parts are in a proper ſtate, by the diviſion of the protruding teeth, thus removing the primary cauſe. To this treatment, ſhould ſymptoms of predominant acidity appear, a ſlight addition of alkalis, as the aqua kali, or ſp. ammoniæ comp. may be joined.

CLX. Where no immediate protruſion, however, is expected, this treatment requires ſome limitation, and an intermediate uſe of cordials will be proper; but this muſt be regulated, as well as the degree of purging, by the ſtate of the irritation, and the ſtrength of the patient.

CLXI. The other ſpecies of diarrhœa, or the true

watery gripes, may be confidered as a ſpecies of lientery. It is marked by thin watery ſtools, ſo frequent, that every thing taken immediately runs through the child, and often of a dark fœtid colour. The period of its attack is various; often, in ſmall delicate infants, within the month: at other times it ſucceeds ſome previous illneſs, and in other caſes is merely accidental. The ſymptoms all increaſe in violence as it advances; and, from its rapid effects, it requires immediate attention.

CLXII. For the treatment of this diſeaſe, the evacuation of the primæ viæ is a previous and indiſpenſable ſtep: an emetic ſhould therefore be given in divided doſes, ſo as to have a full operation; and theſe doſes repeated at a proper diſtance from each other, as ten minutes or a quarter of an hour. The emetic is to be ſucceeded by a warm laxative, as the rhubarb, with ſome aromatic. After the primæ viæ are thus cleared, the further removal of the complaint is to be truſted to ſmall doſes of ipecacuanha or antimony, combined with abſorbents and aromatics.

CLXIII. Where the diſeaſe, however, reſiſts this treatment, and a predominant acidity ſeems to attend, this is to be ſtudiouſly corrected by large doſes of abſorbents and alkalies, as the aqua kali, tinct. of myrrh, or ſuccinated ſp. of ammonia, which may be even premiſed by a repetition of the emetic.

CLXIV. When this predominant acidity is corrected, if the diarrhœa ſtill continue, opiates and aſtringents will be then proper, as the chalk julap, with laudanum and aromatics, or the logwood decoction.

CLXV. Beſides this internal treatment, the application of aromatic plaſters to the abdomen is common as an auxiliary remedy.

CLXVI. In the treatment of all abdominal complaints of children, much attention is neceſſary to the nature and kind of the food or nouriſhment taken.

CLXVII. The food of children, with this view, ſhould be deprived of acid as much as poſſible: hence, inſtead of milk, animal food, in the form of thin beef-tea or mutton-broth, is preferable; and bread, deprived as much as poſſible of a tendency to aſceſcency by previous fermentation. The beſt kind for this purpoſe *is the ruſk* and French roll, or flour baked in an oven till it breaks into a powder, and afterwards made up with boiled milk. Powder of arrow-root and tapioca may be likewiſe uſed in the ſame way. Indeed it is *proper* to alternate the food occaſionally from one kind to another, and frequently to exhibit the animal food in a ſolid form, when the ſtomach rejects fluid nouriſhment.

CLXVIII. The change of the wet-nurſe, alſo, makes often a neceſſary part of the treatment.

CLXIX. This morbid ſtate of the bowels deſcribed is frequently attended with cutaneous eruptions. It is always a favourable ſymptom, and produces a relief of the moſt urgent ſymptoms.

Incontinence of Stools.

CLXX. A confequence of long-continued diarrhœa is frequently an incontinence, or want of retention of the alvine difcharge. This complaint is temporary, and departs as ſtrength is acquired. Cold affuſion of the parts may be uſed as a temporary expedient.

Worms (Vermes).

CLXXI. From this affection no part of the body is excepted, as worms have been found in the heart itſelf: nor is any period of life confined to their generation, for they have been met with in the fœtus as well as in the moſt advanced age.

CLXXII. No diſeaſe is more frequent than this in early childhood, and its preſence is not always decided by morbid ſymptoms; ſo that the actual paſſing of them is at times the ſole indication of the diſeaſe. But, for the moſt part, morbid ſymptoms attend; and thoſe enumerated as moſt commonly diſtinguiſhing them are what we have deſcribed in vol. I. p. 203, viz. pain and acid eructation of ſtomach, variable appetite, foul tongue, fœtid breath: the belly full, hard, and tenſe, with occaſional gripings or pains in different parts of it, particularly about the navel; irregular ſtate of the belly, heat and itchineſs of the rectum, urine white and limpid, often diſcharged with difficulty.—With theſe ſymptoms are joined a dull appearance of the eye, often dilation of the pupil, itchineſs of the noſtrils, ſhort dry cough,

flow fever, with evening exacerbations, and irregular pulſe, grinding of the teeth in ſleep, &c.

CLXXIII. The cauſe of worms we formerly noticed as uncertain; and their exiſtence in every part of the body, and alſo before birth, ſhows that a diſpoſition prevails in the human body to their generation, under certain circumſtances; and this diſpoſition prevails independent of the preſence of any external cauſe favouring it.

CLXXIV. This diſpoſition in the human body ſeems favoured by a certain laxity, or moiſture, particularly of the primæ viæ. Hence the frequency of the diſeaſe in childhood.

CLXXV. The prognoſis to be formed in caſe of worms depends much on their particular ſpecies, and alſo on their degree of irritation.

CLXXVI. The ſpecies of worms met with are of four different kinds: the teres or round worm, which generally occupies the higher parts of the inteſtines; the aſcarides, or maw-worms, which occupy the lower; the cucurbitina, or ſhort flat worm; and the tænia, or tape-worm. Of theſe the moſt dangerous is the tænia; but it is ſeldom met with in childhood.

CLXXVII. The morbid effects ariſing from the preſence of worms depend on deprivation of nouriſhment, irritation of parts, leſion of ſubſtance.

CLXXVIII. For the cure of worms two indications ariſe:

1. To effect their expulsion; and,
2. To prevent their generation.

CLXXIX. Their expulsion is attempted in three different ways:

1. By simple evacuation or purging; and the remedies with this view are various, as senna, scammony, and calomel: rhubarb, and calx of antimony; Æthiop's mineral and calomel; valerian, and jalap; the different fœtid or strong bitters, as rue, tansy, &c.

2. By mechanically dislodging them from their seat by oils, as the olive and castor oil; by the amalgam of tin and quicksilver; by coweech; by pewter-filings, &c.

3. By chemically destroying them, as by lime-water, by volatile alkaline salts, by decoction of quicksilver water, &c.

CLXXX. The future generation of worms is prevented by strengthening the tone of the bowels, and obviating the accumulation of mucus. This is done by the use of tonics, and the particular choice of diet.

CLXXXI. The tonics most employed are those of the astringent kind, particularly the steel, in the form of the rust, or as a chalybeate water, joined with some bitters.

CLXXXII. External applications have also been had recourse to for the removal of this complaint. These consist of plasters with aloes, and turpentine, with aloes and rue, liniments of aloes and gall, &c.

CLXXXIII. The diet of children, as a preventative

of worms, ſhould be regulated ſo as to avoid all fat and greaſy articles. Food of eaſy digeſtion, and having rather an alkaleſcent tendency, ſhould be preferred.

Convulſions (Convulſiones).

CLXXXIV. We have already noticed two forms of this complaint, which attack the firſt weeks of exiſtence (p. 44 and 46): we now examine that form which injures the more advanced period.

CLXXXV. Its appearance differs nothing from that which attacks the adult. The body becomes either convulſed all at once, or the limbs; the jaws are locked, and the mouth filled with ſlime. In this ſtate the child continues till ſleep ſupervenes, from which it awakes pretty well, till the ſame appearances are renewed at intervals of various diſtance. It is divided into two ſpecies, the ſymptomatic and idiopathic.

CLXXXVI. Four cauſes of the ſymptomatic convulſion may be remarked:

The 1ſt is commonly ſeated in the primæ viæ, and conſiſts in the aliment being converted into a thick viſcid paſte, adhering to the inteſtines, and not conveying a proper nouriſhment.

The 2d ariſes from the irritation of teething.

The 3d from the diſappearance of a cuticular eruption or diſcharge; and

The 4th from worms.

CLXXXVII. The preventative treatment of convul-

ſions from the firſt cauſe will depend on giving a nouriſhment as little adheſive as poſſible, and alſo preventing any accumulation of viſcid matter in the primæ viæ, where a diſpoſition prevails to form it.

CLXXXVIII. The firſt intention is anſwered by avoiding the farinacea as much as poſſible, particularly meal-pap, and giving in its place thin animal ſoup, as veal tea and milk.

CLXXXIX. The ſecond purpoſe is effected by the uſe of laxatives, as the caſtor-oil, occaſionally repeated, with cordials interpoſed to prevent debility from its operation.

CXC. This cauſe of convulſions will generally be diſcovered by the previous ſymptoms, as the child being affected with loathings, coſtiveneſs, purging, by its pale countenance, large belly, and diſturbed ſleep.

CXCI. Where much irritability prevails, independent of the irritation of the primæ viæ, a vitiated atmoſphere, want of cleanlineſs, and many other ſimilar cauſes, are ſufficient to induce this affection.

CXCII. Convulſions from the ſecond cauſe mentioned, or teething, are eaſy to be removed by taking off the irritation by a diviſion of the affected gum, or ſcarification; of which a more ample detail will be given under that head.

CXCIII. Convulſions from the third cauſe, or retropelled eruption, by a raſh diſappearing, or diſcharge drying up behind the ears, requires the uſe of the warm

bath, and every means of returning the eruption, or ſoliciting the diſcharge by bliſters, &c.

CXCIV. We have thus conſidered the firſt ſpecies of convulſion, or the ſymptomatic. It more frequently occurs than the ſecond, or idiopathic, which comes on without any previous ſymptom to account for it.

CXCV. Its effects are generally more formidable than the ſymptomatic; and, if recurring, this ſpecies is apt to be ſucceeded by the loſs of the ſenſes of ſight or hearing, or a general injury of the intellects.

CXCVI. The treatment here requires the moſt active means, as removing general irritation by bleeding and bliſters, and alſo attending to the ſtate of the primæ viæ; after which, the uſe of antiſpaſmodics will be proper.

CXCVII. Bleeding is beſt performed by leeches, as one or two on the foot, or behind the ears, which may be repeated once or twice. The bliſters ſhould be applied to the head, that is, as near as poſſible to the principal ſeat of the affection. The ſtate of the primæ viæ ſhould be kept looſe by a proper uſe of laxatives; and, theſe means being premiſed, the antiſpaſmodics employed may be, tincture of ſoot or of caſtor, ſp. of hartſhorn, liquid laudanum, oil of rue, muſk, ſperma-ceti, and oil of aniſe; the muſk has been particularly recommended by ſome authors.

CXCVIII. The uſe of external antiſpaſmodics is likewiſe a common practice, as oil of amber or water

of ammonia, applied to the back-bone, palms of the hands, and foles of the feet.

CXCIX. When convulſions, from their frequent repetition, aſſume ſomething of a chronic form, iſſues, or ſetons and chalybeates, become the proper mode of treatment.

CC. In the treatment of all convulſions, much depends on being able to make the proper diſtinction when they are of an idiopathic or ſymptomatic nature, that is, to aſcertain their cauſe.

CCI. One particular cauſe of convulſions requires to be mentioned, which is ſimply over-diſtenſion, the ſtomach being ſuddenly filled with an exceſſive quantity of nouriſhment. Whenever, therefore, a convulſion ſuddenly comes on, and immediately after feeding or ſucking, this cauſe may be ſuſpected, and the oppreſſion of the organ is to be taken off by unloading it of its contents, either by irritation of the throat with a feather or finger, or by the immediate exhibition of an emetic.

CCII. When the cauſe is thus removed, the effect generally ceaſes.

CCIII. In ſome caſes, alſo, convulſions appear as an effort of nature, either in uſhering in, or giving a criſis to, certain diſeaſes. Their treatment, therefore, muſt be guarded till their cauſe is aſcertained.

CCIV. In forming our opinion on convulſions, the frequency of their recurrence, and the violence of

the fits where repeated, determines our prognosis respecting the actual danger of the attack.

Palsy (Paralysis).

CCV. Palsy is a rare disease in children: it does, however, occur at times, and that in different degrees, the same as in adults.

CCVI. Its attacks extend to different parts of the body, being sometimes confined to the upper, sometimes to the lower extremities; but its most common form is that of *hemiplegia.*

CCVII. The morbid effect produced by it is also in various degrees, from simple weakness of the limbs to a total abolition of their use.

CCVIII. The period of its attack is uncertain: it has been known so early as three days from birth, but in general it occurs at a more advanced period.

CCIX. The prognosis is here more favourable than in adults; but if not soon relieved, that is, in a few months, the disease becomes chronic, and, though life is dragged on, the patient seldom arrives at manhood.

CCX. The treatment of palsy in infancy depends much on exciting the proper action of the primæ viæ, where the cause of the complaint is generally seated. For this purpose brisk purging is proper as a

leading indication. Bliſters and external ſtimulants become alſo a neceſſary part of the cure; and, theſe means being premiſed, antiſpaſmodics may be then conjoined, as the valerian, caſtor, prepared ammonia, æther, &c.

Electricity alſo may be attempted.

CCXI. This diſeaſe is often dependent on, or connected with, hydrocephalus; in which caſe, the ſame being once aſcertained, the treatment proper for this primary affection becomes neceſſary, particularly mercury and diuretics, in preference to any other.

Epilepſy (Epilepſia).

CCXII. Epilepſy we formerly conſidered in a general way, (in vol. I. p. 72,) and alſo in this volume, under the forms of inward fits and tetanic ſpaſm, as occurring ſoon after birth; but, when further advanced, it appears in children under the proper epileptic paroxyſm or fit.

CCXIII. This form conſiſts in the child ſuddenly and unconſciouſly falling down, when convulſion takes place, either with or without the loſs of the ſenſes.

CCXIV. The cauſes of this diſeaſe we referred to three ſpecies of irritation, to which a fourth may be added, as the irritation on particular glands towards the age of puberty.

CCXV. The progreſs of this affection is generally

ſuſpended by this period of life; and, where it is not, there is very little expectation of a cure during the remainder of it.

CCXVI. Diſſections of this diſeaſe, where fatal in children, ſhows always one of two morbid alterations, either a collection of water in the ventricles of the brain, or a ſmall ſharp point of bone projecting from the internal ſurface of the os frontis or ſella turcica.

CCXVII. The treatment of this affection in children is to be attempted chiefly by

1. Removing abdominal irritation; and,
2. The uſe of tonics and antiſpaſmodics.

CCXVIII. The firſt is performed by a proper exhibition of laxatives.

CCXIX. The ſecond conſiſts in the bark, chalybeates, and cold bathing; or in the uſe of opium, valerian, ol ſuccini, muſk, and other antiſpaſmodics; not even omitting, where the caſe is obſtinate, electricity.

CCXX. External irritation alſo, with bliſters, is in ſome caſes, towards the age of puberty, uſeful.

St. Vitus's Dance (Chorea.)

CCXXI. This diſeaſe was treated of in vol. I. p. 78. It conſiſts in partial convulſions, or continual motion

of the extremities of one ſide, as there deſcribed, ſeldom extending its attacks beyond the fifteenth year. Its cauſes are, generally, predominant irritation in the primæ viæ, of various kinds, or elſe general relaxation of the ſyſtem.

CCXXII. Attention, therefore, to the particular irritation, in the firſt paſſages, ſhould precede every other attempt at a cure, by alteratives and purges; and, when this is found inſufficient, tonics are then indicated, as the bark, chalybeates, and cold bathing. Sometimes, exciting a more powerful irritation, by electricity or dry cupping, has ſucceeded.

Night-mare (Incubus).

CCXXIII. Night-mare is an affection well known: it conſiſts in a ſenſe of oppreſſion, weight, and tendency to ſuffocation, varying in its period of duration, and alſo in the degree to which it attains. It is an affection common to children as well as adults; and it can hardly be termed a diſeaſe, as they frequently outgrow it.—The fit, however ſhort in duration, always leaves ſome unpleaſant effects, as lightneſs of head, tremor, and anxiety; but theſe are merely temporary.

CCXXIV. The cauſes of this complaint are ſomewhat obſcure. Spaſm of the cheſt certainly takes place; and the flatulence and indigeſtion which prevail in it are merely concomitant ſymptoms. It is alſo frequently connected with the circumſtances of growth, as it is known to depart after the age of puberty. Its cauſes,

however, are commonly referred to flatulence and indigeſtion, exciting ſpaſm of the diaphragm and muſcles of the cheſt, the ſtricture of which occaſions the dread and ſenſe of ſuffocation.

CCXXV. The treatment depends on rouſing the patient by the uſe of volatiles or fœtids, ſo as to terminate the fit; and afterwards to prevent its recurrence by attention to the ſtate of the firſt paſſages.

CCXXVI. Particular food will be more apt to excite this irritation than others; and the propriety of abſtinence, in regard to ſupper, is therefore pointed out. The uſe of tonics, in general, will render the patient leſs liable to be affected by ſpaſm of any kind. Hence its prevention depends on proper diet, and the uſe of cold bathing.

Temporary Loſs of Speech (Aphonia).

CCXXVII. Temporary loſs of ſpeech, or a difficulty in utterance, is frequent with ſome children, from the fourth to the ſeventh year. It forms in its attack only a temporary inconvenience, ſeldom exceeding a quarter of an hour at a time.

CCXXVIII. It depends probably on the ſame cauſe as the other convulſive affections during this period, and attention is always to be paid to trace the particular irritation to which it may be referred, as this points out ſomewhat the means of relief.

CCXXIX. The treatment conſiſts in the uſe of local ſtimulants to the part during the period of the fit, as an infuſion of lavender or mint, or elſe a decoction of pellitory; and, in the interval, applications to invigorate the ſyſtem in general, and prevent its recurrence.

Excoriations of Skin.

CCXXX. Excoriations of different parts of the cuticular ſurface, either from its delicacy or particular cauſes of irritation, is a common complaint of children; but the part moſt liable to this, and requiring often a ſpecial treatment, is behind the ears.

CCXXXI. The chief ſources of irritation producing this complaint are thoſe of the bowels and teething; in both which caſes it is conſidered as an effort of nature to relieve the irritating cauſe.

CCXXXII. It is divided into two ſpecies, varying only in degree.

CCXXXIII. In the firſt or ſimple excoriation, little is neceſſary in the treatment but cold waſhing, and the application of a mild aſtringent to the part, as a bit of ſinged rag, which is the popular remedy.

CCXXXIV. In the ſecond ſpecies, when it paſſes into ulceration, and this ulceration ſpreads rapidly and gets dry, with a foul appearance and painful ſtate of the ſore, the indications then pointed out are,

1. To relieve the part by a neighbouring irritation, or the application of a blister to the neck; and,

2. To dispose it to heal by abating pain by the use of anodyne fomentations, and exciting the tendency to re-union by some mild mercurial liniment, particularly that with a proportion of calomel.

CCXXXV. To assist this treatment, some gentle alterative may be administered internally, consisting of any mild combination of ☿ and antimony, or of ☿ and sulphur, or the calomel and cinnabar of antimony, or Æthiop's mineral.

CCXXXVI. When this species of ulcer shows, as sometimes happens, a tendency to mortification, the bark is then indicated to be used externally in the form of fomentation, and also internally in such quantity as the age of the patient admits.

Auricular Abscess.

CCXXXVII. Matter discharged from the ears in various quantities, and also with various appearances of inflammation, both in degree and extent, are common to childhood.

CCXXXVIII. Such complaints are most frequently the attendant of a scrofulous constitution.

CCXXXIX. It is generally treated as a common inflammation, by the use of laxatives, and attention to the discharge of the matter, by the position of the child

when in a recumbent poſture. Where this is not ſufficient, deterſive injections are then employed, conſiſting of ſome mild aſtringent waſh; and, failing of theſe means, ſome warmer ſtimulant is then applied, of which a detail is given, vol. I. p. 218, and vol. II. p. 213, under the article Deafneſs.

CCXL. When the diſeaſe appears to reſiſt this treatment, an iſſue may be opened near the ſeat of it, or the nape of the neck, mild mercurials internally exhibited, and fumigation with ſulphurated ☿ applied to the part.

Fevers (Febres).

CCXLI. The extremes of age are generally experienced leſs diſpoſed to the attack of proper fever; and hence old people and children often eſcape in the moſt virulent ſtages of febrile contagion. An infant will often continue to ſuck, during the progreſs of the malady, its diſeaſed parent, to the laſt minute of exiſtence, and remain afterwards untainted by infection. It is the prime of life, the flos juvencæ, that is the victim of this diſeaſe.

CCXLII. The fevers of children, therefore, ariſe only from the cauſes already diſcuſſed, viz. teething, diſorders of the primæ viæ, glandular affections, cutaneous diſeaſes, ſpecific contagions peculiar to this period of life, or ſimply the application of cold. It is the conſideration of this laſt, therefore, that claims our attention.

Catarrhal Fever (Febris Catarrhalis).

CCXLIII. This fever, or more properly catarrh, is diſtinguiſhed by cough, hoarſeneſs, and difficulty of breathing, with affection of the noſe and eyes, only varying from the catarrh in the adult by the violence of its ſymptoms.

CCXLIV. Its treatment, therefore, in infancy, requires more attention to counteract this violence, by leſſening the irritation on the breaſt by a bliſter or blood-letting. A bliſter may, therefore, be applied to the region of the ſtomach; and, if not effectual in the relief procured, may be ſucceeded by a leech or two on the foot, as the moſt convenient ſituation. Along with this, when there is much phlegm, an emetic may be exhibited; and, after its operation, oily medicines had recourſe to, to quiet the irritation of the cough. The bowels are to be kept looſe by ſmall doſes of antimonials, or elſe by common laxatives.

Stomachic Fever.

CCXLV. Where the fever does not partake of this catarrhal form deſcribed, or where difficulty of breathing prevails without a correſponding degree of fever, it is moſt probably connected with, or dependent on, irritation of the ſtomach, and accumulation of bile may exiſt as its cauſe. The ſtate of the ſtomach, therefore, forms here the leading indication; and ſhould precede every other treatment, an emetic being exhibited for its evacuation.

Inteſtinal Fever.

CCXLVI. In the ſame way accumulation in the inteſtines may produce a ſimilar morbid ſtate; and when the emetic is not fully effectual, or relieves only in part, laxatives and the teſtacea may be alſo given; or, ſhould a partial alleviation only attend this plan, more powerful purgatives are then pointed out, as the caſtor oil, and compound ſcammony powder, or calomel.

CCXLVII. From the glutinous tendency in the excretions of the bowels of infants, this cauſe of accumulation ſhould always be looked to, and every attack of febrile ſymptoms ſhould be ſuſpected as connected with it, the treatment of which will often prove ſucceſsful in affording relief.

CCXLVIII. When the progreſs of the fever reſiſts this treatment, ſaline draughts are then to be had recourſe to, ſimply, or combined with the vinum antimonii; by a due perſeverance in which the diſeaſe will come to be removed, or at leaſt ſo far mitigated as to yield to the uſe of the bark, which ſhould then be exhibited in a light decoction.

CCXLIX. Theſe fevers in infants are often ſucceeded by peculiar conſequences not ſo common in adults, and which may be termed a ſort of ſecondary affection.

Conſequences of Fever.

Cutaneous Eruption.

CCL. The firſt to be noticed is a cutaneous eruption in the form of the red-gum or of the thruſh. The former is to be conſidered always as a favourable ſymptom, but at the ſame time a mark of the violence of the preceding fever: the latter, or thruſh, when appearing, is rather to be regarded as an unpropitious appearance, and often fatal in its conſequences.

Cervical Pain and Tumor.

CCLI. The ſecond conſequence of preceding fever in infants is pain, ſwelling, and ſtiffneſs of the neck, often drawing the head to one ſide. This affection requires the application of heat and embrocations, to which it ſoon yields.

Intermittent Fever (Febris Intermittens).

CCLII. The ague is not a diſeaſe very frequent in childhood. In particular ſituations, however, it does occur, and its conſideration is therefore proper here.

CCLIII. Its ſymptoms are the ſame as in the adult, conſiſting in a regular ſucceſſion of cold, hot, and ſweating fits, with the intermiſſion of a certain period before their repetition; and this intermiſſion is chiefly diſtinguiſhed by a high-coloured urine, with a laterious or red ſediment.

CCLIV. The periods of the ſeaſon moſt common for the attack of this fever is ſpring and autumn; and the form it appears in, in this climate, is the tertian, or that which gives an intermiſſion of 48 hours between the paroxyſms.

CCLV. Children, within the year, have been known to be the ſubjects of it; and wherever general, in any ſituation, infancy never eſcapes its attack: a circumſtance in which it differs from other ſpecies of contagion.

CCLVI. The prognoſis in this diſeaſe is always favourable; and, when obſtinate, it has been known to yield to the attack of another diſeaſe, particularly the ſmall-pox; a proof its contagion is of a debilitating nature.

CCLVII. The cauſe of intermittent fever is clearly one ſource, marſh miaſma, or that ariſing from a low damp ſituation, acted on by heat; but in infancy the diſeaſe is often combined with diſorder of the primæ viæ, frequently with worms, or elſe with obſtructed biliary ſecretion.

CCLVIII. The ſpecific for this diſeaſe in adults is the bark; but in infants it is difficult to employ it. Hence the cure is more uncertain; and the treatment, therefore, requires to be more varied.

CCLIX. It is generally, as in other caſes, premiſed by an antimonial emetic. This is ſucceeded by ſmall doſes of James's powder during the period of fever, and purges of rhubarb and calomel during the intermiſſion:

or, instead of this, saline draughts are repeated every six or seven hours; or diaphoretics, as the crude sal ammoniac in a few grains, myrrh, and cream of tartar, or aromatics.

CCLX. When the bark is employed at this early period, it is often quilted in a waistcoat, worn next the skin, or applied in a large poultice folded up in thin linen or gauze, and applied warm on the region of the stomach, being occasionally renewed. When given internally to infants, it should never be on an empty stomach.

The remedies for this disease, invented by ignorance or superstition, are numerous. Thus whatever can be conceived disagreeable to the taste or appearance has been occasionally employed, and whatever, by its poignancy or stimulus, can excite the action of the system. Hence spiders' web in wine, pepper and alum, flour of sulphur and brandy, and a thousand others, have been held up as specifics.

CCLXI. In infancy the ague-cake, or obstruction of the liver, is not so frequent a consequence of the disease as in adults. When occurring, it yields to the use of calomel and bitters.

General Remarks on Infantine Fevers.

CCLXII. First, Most of the fevers of infancy possess an inflammatory tendency, or resemble synocha; they are, therefore, acute, and of short duration.

CCLXIII. Second, Wherever a fever is protracted in infants, it aſſumes the remittent form.

CCLXIV. Third, The fevers of children moſt commonly ariſe from ſlight accidental cauſes, either connected with the primæ viæ or the ſtate of the ſkin. In their treatment theſe cauſes are always to be had in view, and the clearing the firſt paſſages, and producing a free determination to the ſkin, are the chief objects to be regarded.

Dentition (Dentitio).

CCLXV. Teething is the moſt critical period of infancy. During it the fatality is reckoned at one-tenth of the ſpecies, and its morbid effects depend much on the ſtate of the ſyſtem with reſpect to its tendency to inflammation. This ſubject we already conſidered in vol. II. p. 41, in a curſory manner: we ſhall now conſider it more minutely here.

CCLXVI. The period when infantine dentition is complete is three years; from ſix months, therefore, to that period, the conſtitution ſuffers from a conſtant irritating cauſe acting upon it. Its ſufferings, however, will depend much on the interval which occurs between the ſucceſſive protruſion of the teeth. This varies conſiderably in different children, and alſo in the ſame child, from different circumſtances in the teeth themſelves, extending ſometimes from a month or leſs to half a year, and ſo on.

CCLXVII. The general prognoſis formed in dentition is, that the extremes of health and debility are equally

dangerous during the eruption; for, ſtout children and irritable weak ones both ſuffer alike from it. Dentition is alſo eaſier in winter than in ſummer; fat children are more affected by it than lean; and the occurrence of diarrhœa is always a favourable ſymptom.

CCLXVIII. The commencement of dentition varies alſo in different children. In ſtout ones it appears ſooneſt; but in the weak and ricketty it is often protracted to a late period, even the length of two years, before any appearance takes place.

CCLXIX. In the progreſs of dentition the two front teeth in the lower jaw are commonly cut firſt, the one following the other at the diſtance of fifteen days. The large ones of the upper jaw appear ſoon after, ſometimes at the ſame time. A conſiderable period then elapſes, till the eye-teeth appear, one on each ſide, ſucceſſively; the reſt of the canini follow; and, laſt of all, the molares. This proceſs, however, is by no means ſo regular,—a protruſion of teeth frequently occurs all at once: in other caſes the ſmall molares frequently appear before the canini, and the latter again before the eye-teeth.

CCLXX. In regard to the different figure of the teeth influencing their protruſion, it may be obſerved, that the molares, from their bluntneſs, are attended with moſt conſiderable irritation, and that diarrhœa always marks their cutting; that the canini are next to them, from their middle being the thickeſt part; and that the inciſores give leaſt pain, from their ſharp point allowing the whole tooth to paſs.

CCLXXI. From the fourth month every cauſe of indiſpoſition affecting the child is generally referred to the head of dentition; but thoſe ſymptoms which more eſpecially diſtinguiſh it are:

1. A tendency to drivel or ſlaver much, with ſtarting, and thruſting the fingers into the mouth.

2. Expanſion, heat, and ſwelling of gum.

3. A circumſcribed red or hectic fluſh on the cheek.

4. Eruptions on the face and ſcalp.

5. Diarrhœa, with its uſual irritation, or griping and morbid ſtools.

6. Spaſms, and general irritation of the nervous ſyſtem, preventing ſleep.

7. Alteration in the ſecretion and appearance of the urine; and,

8. Sometimes ſwelling of the extremities, though rare.

CCLXXII. From this view of the common progreſs of dentition, and its attendant ſymptoms, it is proper to conſider the treatment the latter require when ſo violent as to form a real morbid ſtate.

CCLXXIII. The cauſes which influence them in their violence are:

1. The degree of action in the ſource of irritation, or in the protruding teeth.

2. The irritability of the ſyſtem; and,

3. The preſence of other affections at the ſame time.

CCLXXIV. The conſtitutional ſymptoms to which theſe cauſes give origin are chiefly fever and convulſions.

Dentile Fever.

CCLXXV. The fever here is to be treated on the ſame plan as the ſynocha or inflammatory ſpecies. Bleeding with a leech or two behind the ears will be occaſionally proper; but this evacuation, with children, requires much reſtriction.

CCLXXVI. Diarrhœa is a ſymptom always favourable, and ſhould therefore be kept up in a moderate degree; or, if coſtiveneſs prevails, it ſhould be even excited by the uſual means of laxatives.

CCLXXVII. Dilution, when ſucking is not permitted, ſhould be particularly attended to, and ſmall quantities *of light food* only given at a time, as the action of the ſtomach is generally ſomewhat impaired, and digeſtion imperfect.

CCLXXVIII. In retention of urine during this period glyſters are neceſſary; but the warm bath is ſtill more uſeful. Antimonials, which preſerve diarrhœa, and likewiſe act on the ſkin, are here proper auxiliaries.

CCLXXIX. As directing ſomewhat the propriety of the treatment, the exiſtence of a diarrhœa and cutaneous eruption, it may be remarked, always give dentition a favourable and mild termination.

CCLXXX. This diarrhœa often occurs ſpontaneouſly during dentition, to a violent degree, and for a long continuance. During this period, however, the conſtitution of the child wonderfully ſupports it; and that continued action of the irritating cauſe gives a temporary vigour, which enables the child ſoon to recover it.

CCLXXXI. When very violent, however, it may be reſtrained by a moderate uſe of the teſtacea, with the contrayerva powder, or a ſmall proportion of an antimonial, as the James's powder; or by a doſe of the diluted compound ſpirit of ammonia, or even a drop or two of laudanum. But, though moderated, it ſhould never be entirely ſtopped.

CCLXXXII. But, beſides the bowels, the irritation of dentition is, at times, alſo extended to the lungs, aſſuming the form of peripneumony; and it is during the cutting of the canine teeth that this form is apt to appear.

CCLXXXIII. The treatment here does not vary from that already recommended, viz. the promotion of diarrhœa; but beſides this, from the alarming nature of the ſymptoms, particular attention is neceſſary to remove the local irritation or cauſe, by aſſiſting the protruſion of the teeth in the manner afterwards directed.

CCLXXXIV. This, then, forms the uſual treatment of the firſt and moſt general morbid ſtate attending dentition; we are now to examine the other, or the attack of convulſions.

Dentile Convulſions.

CCLXXXV. Dentile convulſions are preceded by uncommon ſtarting in ſleep. Their diſtortions are more confined to the muſcles of the face than the extremities; and they are often preceded by a hoop or catch in the breath.

CCLXXXVI. The irritation being then ſtrongeſt, they are moſt apt to occur on the teeth cutting the perioſtæum,

which, more than the other parts of the gum, resists their protrusion.

CCLXXXVII. Besides the general management already detailed for the treatment of fever, the local means here demand particular attention. These local means consist in the application of blisters behind the ears or to the back; but the most certain relief is experienced from the division of the gum, and removing the cause of irritation by the operation of scarification.

CCLXXXVIII. Wherever symptoms of dentition produce the morbid symptoms described this operation should never be *omitted*; it should be begun early, and should be *occasionally* repeated, according to the urgency of symptoms; and it should never be entirely given up, but on the complete protrusion of the teeth.

CCLXXXIX. Pain and fever often arise from the first appearance of dentition; and in these cases, though no protrusion can be expected for weeks, still the operation will give considerable relief, and the discharge of blood in this way will be more useful than even the application of leeches.

CCXC. The consequences attending this operation are always trifling, as it can neither tend to injure the future teeth nor thicken the gum, if properly performed. It is always called for, wherever convulsions arise, as the certain and primary means of relief; for, by thus removing the cause, the effect cannot fail to cease.

CCXCI. In doing it, the great object is to remove all

the ſource of irritation, or unlooſe the whole protruding edges of the teeth that are advancing. If one point is left acting upon a portion of the undivided perioſtæum, the morbid ſymptoms will ſtill continue. As much, therefore, depends on the operator as the operation.

CCXCII. The operation is performed after ſecuring the child, as directed in vol. II. p. 230, by the ſurgeon opening the mouth with one hand, while with the forefingers of the other he introduces the ſteam, or inſtrument, and makes a conical inciſion along the gums; for it muſt extend ſo as to relieve every tooth immediately advancing, and for ſuch depth as to lay the tooth or teeth bare. If the ſymptoms are removed by it, the operation may then be conſidered as complete. Should they, however, recur after a certain time, it is again to be repeated; and, in performing it, attention ſhould then be paid to make the diviſion ſomewhat different from the former, in caſe any part, during the former operation, has been omitted.

CCXCIII. The propriety of the operation ſeems even pointed out by the propenſity of children themſelves to remove the exiſting irritation, by leſſening the ſenſibility of the gum. Hence we find them fond of the uſe of hard ſubſtances, which, by their preſſure againſt it, may have this effect. On this point, however, a queſtion has ariſen among practitioners, how far the uſe of ſuch ſubſtances are proper, or ſhould be allowed. In high degrees of irritation it is clear, when the gum is already in an inflamed ſtate, their action muſt increaſe this; but, when the irritation is ſlight, by aſſiſting the eruption, their application may be allowed, though, in-

ſtead of the coral, a piece of liquorice-root, or cruſt of bread, is preferable to any other.

CCXCIV. In high degrees of inflammation, cooling and ſedative applications to the mouth will be proper, as a little honey diluted with weak vitriolic acid, ſyrup of white poppies, &c.

CCXCV. The uſe of theſe laſt applications is particularly indicated where the gum becomes ulcerated in dentition; and, if ineffectual, aſtringent applications are to be had recourſe to, as a ſolution of white vitriol or alum made with honey; and, failing theſe, it is then to be treated as a different diſeaſe, under the head of Canker.

CCXCVI. During the period of dentition, from the ſymptoms of irritation exiſting, and the general tendency to an inflammatory ſtate, the child, if otherwiſe pretty ſtrong, ſhould be confined chiefly to the breaſt, and the quantity of additional nouriſhment diminiſhed.

Affections of Throat.

CCXCVII. Of ſore throats, or cynanche, children are ſubject to two peculiar ſpecies; the mumps and croup.

Mumps (Cynanche Parotidæa).

CCXCVIII. The former is a ſwelling of the neck and throat, or the parotid and maxillary glands, from the

appearance of which the name is derived; attended with reſpiration and deglutition little impeded, and inflammatory fever generally flow.

CCXCIX. The firſt ſymptoms of this affection are marked by the common attack of ſlight fever, with white furred tongue, ſoon ſucceeded by ſtiff painful neck, and ſome ſoreneſs of the throat. The pain and ſwelling of neck increaſe, which diſcover, on examination, a fulneſs and tenderneſs to the touch; theſe, in ſome caſes, are aggravated to acute recurrent pain. The ſwelling continues its progreſs for two or three days, when it begins to ſubſide: but in other caſes, as the diſeaſe advances, the ſkin often aſſumes inflammation. There prevails, however, little tendency to ſuppurate.

CCC. This diſeaſe is moſt frequent in its attacks towards the age of puberty; though it is alſo frequently met with at an earlier period. It terminates in three different ways; either by reſolution, which is moſt common, when the ſwelling gradually departs, and the glands aſſume their natural ſtate; by ſuppuration, which is more rare, when the ſkin gives way, ſome matter is diſcharged, and the ſores heal kindly; by tranſlation, when the affection, leaving the glands of the throat, attacks the teſticles, attended with acute fever, inflammation, and ſwelling; and, after leaving the teſticles, it is again tranſlated to the brain, or aſſumes the form of phrenitis. This termination by tranſlation only occurs towards the age of puberty; and is more frequent in ſome other climates than this.

CCCI. The treatment of this diſeaſe is, in general, very ſimple; ſome mild diaphoretic, and an occaſional laxative, being all that is required. But particular caſes muſt be regulated by the prevailing ſymptoms. If much fever attend, bleeding will then be indicated, and the uſe of antiphlogiſtics, as the ſaline draughts, nitre, &c.: while weakneſs, on the other hand, which more rarely takes place, muſt be counteracted by an oppoſite plan, or the uſe of cordials and ſtimulants.

CCCII. When, after the diſeaſe, an affection of the glands ſtill remains, and ſome hardneſs and ſwelling is felt, diſcutients will then be proper to the part, as the mercurial liniment or ammoniated oil, with the occaſional exhibition of a laxative.

CCCIII. In all caſes of tranſlation an active and rigid antiphlogiſtic courſe will be proper, as in other inſtances of acute inflammation.

Croup (Cynanche Trachealis).

CCCIV. Croup is a diſeaſe formerly treated in vol. I. p. 15. Its ſymptoms are, a ſharp ſhrill cough, with ſtridulous noiſe; laborious or wheezing reſpiration; flushed face, increaſed to livid during each paroxyſm; little external ſwelling, and general fever.

CCCV. This diſeaſe has been divided by late authors into the inflammatory and ſpaſmodic, which require a diſtinction in regard to their modes of treatment.

CCCVI. The former, or the inflammatory, is gradual in its attack, and is preceded for ſome days by ſlight feveriſh ſymptoms, with a teazing ſhort cough, before it aſſumes the characteriſtic marks of the diſeaſe; after which the ſymptoms uniformly increaſe in violence.

CCCVII. The latter, or the ſpaſmodic ſpecies, is ſudden in its attack, which is uſually during the night; and it often alſo intermits, or has intervals of alleviation, during its progreſs, in which it differs from the former.

CCCVIII. The cauſes of this diſeaſe have been aſcribed to cold and moiſture; but late authors have contended for its ariſing from a ſpecific contagion, and conſequently for the infectious nature of the diſeaſe. Theſe facts, however, are ſtill not ſufficiently eſtabliſhed. It has alſo been ſaid that this diſeaſe has been occaſionally met with in adults, contrary to former opinions on this ſubject. Children, however, newly weaned, are the moſt frequent victims of it.

CCCIX. Two ſtages are remarked in the progreſs of this complaint:

1. The inflammatory, which is terminated by the febrile exudation, or thick diſcharge, lining the trachea, the peculiar characteriſtic of the diſeaſe.

2. The mucous ſtage, when the trachea and its branches are now choaked up by this collected diſcharge, formed into a membrane or reduced to a ſolid ſtate.

CCCX. The formation of this laſt ſtage is denoted

by the urine, formerly clear, becoming turbid, and depoſiting, as well as the trachea, a ſediment or exudation, the effect of the diſeaſe.

CCCXI. The prognoſis in this diſeaſe is generally unfavourable, particularly in the inflammatory ſpecies, which is always of ſhort duration, but is often deceitful from apparent remiſſions; and recovery, when it takes place, is almoſt entirely confined to the ſpaſmodic kind.

CCCXII. The treatment here muſt be varied according to the particular ſpecies of the diſeaſe: in the inflammatory ſpecies, topical bleeding, by means of leeches applied to the trachea, and more general bleeding, ſhould be employed; but it will be only uſeful in the earlieſt ſtage of the diſeaſe, and, if relieving, ſhould be repeated. Emetics here, particularly antimonials, form a ſovereign remedy when employed in time, and bliſters will be found uſeful applied to the throat and nape of the neck, and alſo inhaling the ſteams of warm vinegar.

CCCXIII. In the ſecond ſpecies, or ſpaſmodic, aſafœtida, given both by the mouth and glyſter, is a medicine highly commended: it may be ſucceeded by the bark: cicuta is alſo employed, and other antiſpaſmodics.

CCCXIV. Mercury has of late formed a favourite medicine, in the form of calomel, frequently repeated, and in liberal doſes. Mercurial unction, alſo, is uſed to the throat.

CCCXV. This diſeaſe is ſometimes combined with other affections, particularly hydrocephalus, when it proves fatal from this laſt cauſe.

Coughs (Tuſſes).

CCCXVI. Cough is a common complaint of infancy, and ariſes from a variety of cauſes, being more frequently ſymptomatic than a primary affection.

Symptomatic Coughs.

CCCXVII. The cough attending on acute febrile diſeaſes is ſoon known, from the rapid progreſs theſe diſeaſes make, and from the other circumſtances which accompany their attack. Here the treatment is connected with the primary diſeaſe.

CCCXVIII. Cough, alſo, from cold, is marked by catarrhal ſymptoms, and is generally temporary in its nature. When connected with a glandular affection, loſs of ſtrength and hectic fever accompany the progreſs of cough, and point out the cauſe.

CCCXIX. Cough from teething is marked by the particular period of its appearance, and the other ſymptoms taken notice of under this head. *(Vide Dentition.)*

CCCXX. This complaint, however, when ariſing from diſordered primæ viæ, is often difficult to detect:

it is chiefly done by the preſence of coſtiveneſs, or the offenſive ſtate of the eructations and alvine diſcharge: it is alſo moſt ſevere during the night.

CCCXXI. The removal of this cauſe of irritation muſt be effected by purgatives, joined with ſoap and alkalis; as deſcribed under the head of Abdominal Complaints.

Primary Coughs.

Chincough. (Pertuſſis).

CCCXXII. Of coughs, as a primary affection, one of the moſt frequent is chincough.

CCCXXIII. The chincough, or hooping-cough, is a contagious diſeaſe, attacking in paroxyſms of a convulſive ſuffocating cough, with loud noiſe or hoop at each reſpiration, and generally terminating by vomiting.

CCCXXIV. It uſually begins as a common cough or cold, and continues for ſome time without any marked or peculiar ſymptom. There is generally, at firſt, the preſence of fever, having an evening exacerbation, which is various in its duration, and often attends the whole progreſs of the diſeaſe. Soon, however, the fits of coughing become to be marked by the loud noiſe, or hoop, the peculiar feature of the diſeaſe. At firſt there is little or no expectoration: as the diſeaſe advances, it comes on, at firſt thin, and gradually thickens in conſiſtence. The fits are always more ſevere

during the night than the day, and are at times so violent as to threaten ſtrangulation, the face and neck becoming perfectly livid, till reſpiration is recovered, and hæmorrhage likewiſe taking place from the noſe and different parts. The fit often terminates in a faint, though the appetite, on recovery, immediately returns.

CCCXXV. This diſeaſe is probably the product of a warmer climate, and imported into Britain like many others, and it is only of late years that its proper treatment has been underſtood.

CCCXXVI. It is clearly the effect of a ſpecific contagion of a peculiar nature, and highly active, affecting, like the ſmall-pox and meaſles, but once in life.

CCCXXVII. The primary ſeat of the diſeaſe ſeems evidently, from the ſymptoms induced by the paroxyſm, to be the larynx, which is thrown, in conſequence of a morbid irritability, into ſpaſm. How much further the morbid cauſe extends in its ſpecific action is not yet determined, though, in its conſequences, it appears to bring the whole reſpiratory organs into a diſeaſed ſtate.

CCCXXVIII. Our prognoſis is determined by three circumſtances; the period of life, vomiting, and hæmorrhage.

CCCXXIX. After the age of ſix years the diſeaſe is ſeldom fatal; but very young children, from their irritability, frequently ſink under it. When the fit terminates by vomiting, it is always reckoned a favourable

ſymptom, and a hæmorrhage from the mouth, noſe, and ears, relieves the more urgent ſymptoms.

CCXXX. Fever and laborious reſpiration are the two circumſtances indicating an unfavourable iſſue.

CCCXXXI. The treatment of this diſeaſe muſt be regulated by the prevalence of the two leading ſymptoms, fever and ſpaſm, and the degree of violence they diſplay.

CCCXXXII. When the fever is ſtrong, bleeding becomes clearly indicated, as well as bliſters, the uſe of mild diaphoretics, as the ſaline draughts, and alſo laxatives.

CCCXXXIII. When the ſpaſmodic ſtate again is more predominant, and the ſymptoms of fever mild, emetics will be highly uſeful; and antiſpaſmodics, as the aſafœtida, camphor, caſtor, oil of amber, &c.

CCCXXXIV. Where the cough only is troubleſome, and the other ſymptoms mild, an opiate, either in the form of the tincture opii or ſyrup of poppies, at bed-time, will be uſeful. Cicuta is much uſed with the ſame view.

CCCXXXV. External applications are alſo at times uſeful, as rubbing the hands and ſoles with ſp. of ammonia, frequently applying oil of mace or amber to the ſpine and pit of the ſtomach.

CCCXXXVI. When the diſeaſe is recurrent, and

returns ſome time after its apparent departure, an emetic, opening the bowels, and the uſe of antiſpaſmodics, will quickly remove it.

CCCXXXVII. A change of air is very uſeful for the conſequences of the diſeaſe; and a milk and vegetable diet ſhould at the ſame time be conjoined.

Common convulſive, or ſpaſmodic, Cough.

CCCXXXVIII. This complaint is marked by the ſame appearance of cough as chincough; but no fever attends it: it differs alſo from catarrh in the abſence of the catarrhal ſymptoms, and alſo in antiphlogiſtic remedies having no effect.

CCCXXXIX. This complaint occurs moſt frequently in children from two to four years of age: it is often very ſevere, and aſſumes the form of ſpurious peripneumony; but it is always aggravated by the antiphlogiſtic treatment.

CCCXL. In all caſes it yields to antiſpaſmodics, particularly the cicuta; and if much phlegm or expectoration is preſent during the uſe of this remedy, an emetic may be interpoſed. The cure will alſo be aſſiſted by the junction of the bark.

Cutaneous Diſeaſes (Morbi Cutanei).

CCCXLI. The cutaneous diſeaſes of children are

very numerous, and much varied in their appearance: it is proper, therefore, to bring them into one view.

CCCXLII. They arise, in general, from three causes; viz.

1. Affections of the primæ viæ.
2. Teething; and,
3. Specific contagion.

CCCXLIII. When their origin is doubtful, our opinion is to be regulated by the symptoms that attend or precede them, by the period of their appearance, and by the prevailing epidemic at the time.

CCCXLIV. All cutaneous eruptions have a remarkable tendency to break out about the face and head, as a resistance, from its exposure to the influence of external causes, is there most powerfully given to the freedom of the natural discharge; and on the head, especially, this discharge, when vitiated, has its fixed parts condensed, and formed into scales, crusts, and scabs, by adhering to the hair.

Rash (Efflera).

CCCXLV. The most simple cutaneous affection that occurs is what is termed the Rash.

CCCXLVI. Its seat is most generally the face, neck, and breast: its appearance is most common about the decline of summer, or the months of August and September: it is equally sudden in its eruption and depar-

ture. A little ſickneſs is apt to ariſe when this laſt takes place, but it is merely temporary.

CCCXLVII. This diſeaſe is generally attended with ſome diſorder of the primæ viæ, and commonly ariſes from a change in the milk, in conſequence of overheating on the part of the nurſe, or ſome accidental irritation from what ſhe may have taken, or elſe from teething. By this cuticular appearance the original diſorder is relieved; and ſuch morbid appearances are to be conſidered, therefore, as an effort of nature to relieve the internal parts.

CCCXLVIII. Such kinds of raſh require no ſpecial treatment; but, in order to underſtand their cauſe, the ſtate of the primæ viæ, as formerly obſerved, ſhould be a leading queſtion in inveſtigating the nature of all children's complaints.

Baſtard Itch (Pſora Spuria).

CCCXLIX. Baſtard itch is an eruption affecting the face, with watery-headed veſicles and foul blotches, reſembling in its appearance the common itch or pſora: it is chiefly peculiar to the period of teething, and the decline of acute febrile or inteſtinal complaints.

CCCL. Its appearance gives relief to the morbid ſymptoms, when ſevere, at this period; and no particular treatment is requiſite for it, further than what belongs to common raſh, except perhaps a more particular attention to avoid cold.

Milk Blotches (Cruſta Lactea).

CCCLI. The cruſta lactea, or milk blotches, is an eruption of white veſicles, which aſſume a dark colour, reſembling the blackening of the ſmall-pox, and are ſucceeded by ſcabs producing an ichory matter, attended with conſiderable itchineſs.

CCCLII. The ſituation of this affection is generally the forehead and ſcalp, extending half-way over the face, and at times even proceeding farther.

CCCLIII. The period of its attack is the time of teething, and its effect is to leſſen the irritation in the ſyſtem from this cauſe. Hence it is conſidered by many in the light of a critical diſcharge.

CCCLIV. The duration of this affection is various: it continues ſometimes for months, but generally diſappears on the cutting of ſome teeth; in ſome caſes, again, it is known to appear long before the period of teething, and departs even before this proceſs takes place: its duration is judged of by the appearance of the urine, which, when thick and fœtid, is thought to be ſhort.

CCCLV. The treatment conſiſts in doing nothing but leaving it to nature: if, however, it is very extenſive, and the patients are uneaſy, an iſſue, joined with the uſe of a ſulphureous mineral, will tend to remove it. All abſorbents and alteratives are generally ineffec-

tual. The viola tricolor, in decoction, has been recommended, where the diſeaſe is obſtinate, as a ſpecific.

Anomalous Eruptions.

CCCLVI. Under this term we may compriſe the various defedations of the ſkin which attack children during the period of teething, and which ſeem to depend for their particular appearance on the peculiar conſtitution of the child. In ſome caſes they reſemble the meaſles, and are preceded by ſome of the ſymptoms of them, as ſickneſs of ſtomach and fever; in other caſes they form large bright red ſpots, and degenerate into the appearance of petechiæ, ſucceeded at times by rouud tumours in the legs. In other caſes they ſhow the eruptions of ſcarlet fever, and are chiefly diſtinguiſhed from it by the mildneſs of the ſymptoms.

CCCLVII. All theſe appearances are to be treated by moderating the ſtate of fever, if any appears, by mild antimonials, and by attention to the ſtate of the primæ viæ, from their critical nature.

Nettle-Raſh (Urticaria).

CCCLVIII. This is a raſh affecting the breaſt and lower limbs, with an appearance reſembling the ſtinging of nettles.

CCCLIX. It is ſudden in its attack, and preceded by much ſcreaming on the part of the child, and often diſappears in the courſe of a few hours.

CCCLX. Its treatment requires the uſe of ſome mild ſudorific, as the contraſerva powder, or abſorbents, with ammonia; and attention to the ſtate of the bowels.

Phlyctenæ.

CCCLXI. Phlyctenæ conſiſt of veſications or bliſters ſimilar to burns, varying in their ſize and the period of their continuance, which is generally ſome days. They contain an acrid lymph when opened.

CCCLXII. Their uſual ſituation is the belly, ribs, and thighs.

CCCLXIII. The indication pointed out for their treatment is the uſe of abſorbents, and the particular choice of theſe muſt be regulated by the ſtate of the primæ viæ.

The Scorbutic Eruption of Infancy.

CCCLXIV. This is an eruption which diſcharges a thin ſharp ichor, and infects the face and neck, attended with excoriation wherever it touches.

CCCLXV. In its treatment it is very difficult of cure. The expreſſed juice of the ſium aquaticum, or water-parſnip, has been reckoned ſpecific for it, and it is given in the quantity of from one to four or five table-ſpoonfuls a day, mixed with an equal quantity

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of milk; attention being paid, in the mean time, to the ſtate of the primæ viæ.

Grocer's Itch.

CCCLXVI. This eruption appears in ſome parts like the points of pins, with watery heads; at other times as large as peas, which do not itch or feel ſore; but it appears alſo frequently in foul blotches, which degenerate into ſcabby ſores.

CCCLXVII. The ſame appearances are renewed in ſucceſſion, and continue for months, leaving the ſkin at laſt of a dirty hue.

CCCLXVIII. It appears chiefly in a cold ſeaſon, beginning about the arms and thighs, and extending to the other parts, frequently over the whole body.

CCCLXIX. This eruption is not neceſſarily connected with the teething, for it often appears without it. It is alſo known to depart on the protruſion of ſome teeth. It has been known, at times in its progreſs, to be communicated to the mother.

CCCLXX. Its treatment conſiſts in the uſe of ſome mercurial alterative, as the Æthiop's mineral and the hydrargyrus cum cretâ; but external applications muſt at the ſame time be conjoined, particularly equal parts of the ſulphur and nitrated mercurial ointment.

Herpes.

CCCLXXI. A ſpecies of herpes, or broad ring-worm, is very apt to affect thoſe parts of the child that are fretted by its dreſs. The ſkin exhibits a very inflamed appearance, without much pain.

CCCLXXII. This affection often precedes teething, and is always connected with ſome diſorder of the bowels. The nurſe's milk has been found here in fault from its age.

CCCLXXIII. The treatment here conſiſts in attention to the ſtate of the primæ viæ by the uſe of abſorbents; and, if continuing, in changing the milk on the child.

General Axioms.

CCCLXXIV. In the treatment of theſe ſymptomatic eruptions, the following concluſions may be drawn:

1. That being of a critical nature, they are never haſtily to be repelled by external applications.

2. That, in all caſes, the irritation of cold ſhould be carefully avoided.

3. That the regulation of the primæ viæ is a leading indication, whatever the nature of the eruption be.

4. That the ſudden attack of morbid ſymptoms, on the diſappearance of an eruption, requires its being immediately recalled by the moſt powerful means, warm bath and ſudorifics; and,

5. The external applications to eruptions ſhould be no more than diluted kali, or the mildeſt waſhes and powders.

CCCLXXV. We have now conſidered the principal cutaneous complaints that ariſe from teething and affections of the primæ viæ; we are next to examine thoſe which are the effect of ſpecific contagion.

CCCLXXVI. They admit a diviſion into two ſpecies, the acute and chronic.

1. *Acute contagious Eruptions.*

Small-Pox (Variola).

CCCLXXVII. The firſt and moſt frequent diſeaſe of this claſs is the ſmall-pox. We already conſidered it in a general way, in vol. I. p. 41; we are now to examine it as peculiar to the infantine ſtate alone.

CCCLXXVIII. The ſmall-pox is a fever generally of the inflammatory or typhoid ſpecies, attended with a a local inflammation and pain of particular ſeparate points of the internal and external ſurface, forming an eruption. The appearance of this eruption is from the third to the ſeventh day of the fever, terminating in eight days from this appearance by the falling off of cruſts, which leave a pit or mark behind.

CCCLXXIX. The principal phenomena that require
on in the hiſtory of this diſeaſe are:
eſſion of the eruption.

2. The preference it diſplays to certain parts of the body in its ſeat; and,

3. The nature or progreſs of the eruption itſelf after its appearance.

CCCLXXX. With reſpect to the firſt, the eruption begins firſt about the face, and appears more ſlowly about the extremities, and frequently an interval of ſome days elapſes before it is complete on the latter.

CCCLXXXI. In regard to the ſecond, the eruption is always in greateſt quantity on theſe parts moſt expoſed to the external air, as the face, hands, and feet.

CCCLXXXII. With reſpect to the third, the appearance of the local inflammation or pock, and its progreſs, regulates our opinion on the termination of the diſeaſe.

CCCLXXXIII. It is in conſequence of this appearance the diſeaſe has been commonly divided into two ſpecies, the diſtinct and confluent.

CCCLXXXIV. The diſtinct kind is uſhered in by ſtrong ſymptoms of inflammatory fever, the moſt ſtriking of which are great rigor or cold fits, much ſenſe of debility, and torpid ſtate, with pain at ſtomach when preſſed on. Sleep is diſturbed by frequent ſtartings, the lower extremities feel preternaturally cold, and epilepſy or naſal hæmorrhage is a frequent immediate forerunner of the eruption.

CCCLXXXV. The ſymptoms of the next or middle period are marked chiefly by abatement of fever, the changes in the progreſs of the puſtules, which acquire their proper figure and ſize, diſcovering a whey-coloured veſicle on the top, ſurrounded below with an inflamed circular margin. This period is attended with ſome ſwelling on the face, which, ſubſiding, is renewed in the hands and feet.

CCCLXXXVI. The ſymptoms of the third, or declining, period of the diſeaſe, are marked by ſome recurrence of fever and affection of throat, attended with diſcharge of ſaliva. Theſe, however, ſoon abate.

CCCLXXXVII. The diſtinct ſmall-pox, then, is divided into three periods in their progreſs: the period of eruption, which extends to the ſixth or the ſeventh day after the eruption; the middle, or maturing, period, which extends from the termination of the former to the eleventh or fourteenth day; and the period of blackening, which extends from this laſt to the diſappearance of the diſeaſe.

CCCLXXXVIII. The prognoſis in this ſpecies is directed by the ſtate of the fever; for, where the head remains unaffected, no danger attends the diſeaſe.

CCCLXXXIX. The treatment of the diſtinct ſpecies is very ſimple. The application of cold conſtitutes the principal remedy, and this is done either by a free admiſſion of cold air, or, when the febrile ſymptoms are ſtrong, joining with it cold affuſions. Cold affuſion, in its application, ſhould be inſtantaneous, and applied

during the height of the hot ſtage; for, if done at any other period, it is apt to do harm.

CCCXC. Beſides this general treatment, attention is to be paid to the ſtate of the primæ viæ, and the affection of the throat.

CCCXCI. The firſt conſiſts in the uſe of cooling purgatives, with acid and detergent drinks; or, where the fever is ſtrong, in the uſe of antimonials that poſſeſs a tendency to paſs downwards.

CCCXCII. The affection of the throat is to be treated by a proper uſe of diluent gargles and waſhes, to remove the viſcid mucus; and, if deglutition is much impeded, bliſters may even be applied externally to diminiſh it.

CCCXCIII. The confluent ſmall-pox is preceded by epilepſy and fever, with violent nervous ſymptoms which attend their progreſs. Every ſymptom is here more ſevere than in the former ſpecies; and thus the diſeaſe may be ſaid to differ from the diſtinct kind—

1. In the period of its eruption.
2. In the progreſs of its fever; and,
3. In the manner and formation of its puſtules.

CCCXCIV. The period of eruption, or firſt ſtage, is generally finiſhed ſo early as the third day, when they appear in cluſters like meaſles. The progreſs of the fever, or ſecond ſtage, is not interrupted by this appearance, but rather increaſed in its ſymptoms and violence, and the progreſs of the puſtules is marked by an eryſi-

pelatous inflammation, the veſicles remaining flat and ſerous, without proper ſuppuration, or riſing to any eminence.

CCCXCV. The confluent ſmall-pox, then, like the diſtinct, is divided into three ſtages, the progreſs of which, from the violence of their ſymptoms, is ſooner completed. The period of eruption extends from the time of infection to the third day; the period of maturation, from this laſt, never exceeds the eleventh day; and the third, or blackening period, is finiſhed at fartheſt by the fourteenth.

CCCXCVI. The attendant ſymptoms of the third ſtage are here often uncommonly violent. The ſwelling of face begins at an early period. The flow of ſaliva, confined in the diſtinct kind to the third ſtage, is conſtant here, from the period of eruption; or, inſtead of it, a putrid diarrhœa attends. The affection of throat is alſo more conſiderable, and hæmorrhages are frequent from different parts.

CCCXCVII. From this hiſtory of the diſeaſe, the prognoſis to be formed is generally unfavourable; and its fatality is judged of by three ſymptoms: the violence of the fever, as marked by the increaſe and frequency of rigors; the obſtinacy of the diarrhœa; and the petechial or livid appearance of the eruptions.

CCCXCVIII. The favourable ſymptoms, again, are drawn from the ſtate of the voice and reſpiration, and from the continuance of the ſwelling of the face and hands, not ſuddenly diſappearing.

CCCXCIX. The fatality is generally on the eighth or eleventh day; ſometimes, though more rarely, it is protracted to the fourteenth.

CCCC. Diſſections of this ſpecies exhibit the ſame morbid appearances as attend putrid fever; for, in general, no puſtules ſeem attached to the internal viſcera.

CCCCI. From this view of the diſeaſe the matter of ſmall-pox ſeems an active ſpecific contagion, affecting but once in life, and exciting violent inflammation, which terminates ſpeedily, according to the particular manner of its reception into the body, and the ſtate of conſtitution either in benign ſuppuration or gangrene; but before examining theſe circumſtances of its action, as diſplayed by inoculation, the treatment of this laſt ſpecies of the diſeaſe merits conſideration.

CCCCII. The firſt ſtep then, from the nature of the diſeaſe, is the checking the violence of the inflammation; and, as the action of the cauſe is determined chiefly to the ſurface, the repreſſing of it here, as well as in the former ſpecies, forms the leading indication, But when theſe primary means prove ineffectual, and the inflammation proceeds to its ſecondary ſtate, other auxiliaries are then to be employed; and theſe conſiſt of antiſeptics, and ſuch remedies as abate irritation.

CCCCIII. The antiſeptic uſed is principally the bark, and it is beſt exhibited in a fermenting ſtate, or conjoined with yeaſt, wine, and acids, either the vitriolic or muriatic, in a dilute ſtate.

CCCCIV. The remedies, again, that abate irritation, are chiefly cold and opium; and the latter ſhould be exhibited from the fifth day, in a regular doſe, at bed-time.

Meaſles (Morbilli).

CCCCV. The meaſles are a continued inflammatory fever, attended with an eruption in the form of cluſters, little prominent, and reſembling flea-bites, marked by a vivid redneſs, gradually decreaſing till deſquamation enſues.

CCCCVI. The peculiar diagnoſtics of this fever are the ſtrong catarrhal ſymptoms, or affection of the eyes, noſe, and throat, with an inceſſant dry cough. The degree of ſickneſs attending varies in different caſes.

CCCCVII. This diſeaſe, like the ſmall-pox, is properly divided into three ſtages: the firſt extends from its acceſſion to the period of eruption, which is commonly the fourth day from the ſeeming attack; the ſecond, from the eruption to the time of deſquamation, which extends from the former period to the eighth day; and the third, from the deſquamation till the departure of the diſeaſe, or its change into a different affection.

CCCCVIII. During the firſt and ſecond ſtages the chief morbid circumſtance is the ſtrong catarrhal fever; and, during the laſt, the attack of a rheumatic affection, or diarrhœa, ſupervenes.

CCCCIX. The eruption, like that of the ſmall-pox, firſt appears on the face and neck, in diſtinct cluſters. As it occupies the reſt of the body, it thickens into patches, reſembling a thick raſh; and, when deſquamation enſues, it leaves a white dirty ſcurf upon the ſkin.

CCCCX. The prognoſis in this diſeaſe is determined by the pectoral ſymptoms, which, if fatal, is on the ninth day. But meaſles are rarely fatal of themſelves, but from the conſequences, or ſecondary affections, which are apt to attack the ſyſtem from the peculiar nature of their infection.

CCCCXI. The matter of meaſles, then, is a peculiar contagion, affecting but once, and producing ſtrong inflammation, or eryſipelatous affection, of the external ſurface, never tending to ſuppuration, and very rarely to gangrene.

CCCCXII. The treatment, therefore, conſiſts in counteracting inflammation; but, from the peculiar irritation on the lungs, the application of cold, as in ſmall-pox, would be here improper. A moderate temperature is, on that account, preferred; and the obviating the inflammatory tendency of the morbid cauſe truſted to veneſection, laxatives, and an antiphlogiſtic courſe. Though theſe remedies are indicated in every ſtage of the diſeaſe, they are particularly uſeful towards the termination, or evaneſcence, of the eruption; and veneſection is looked upon by every practitioner as a hurtful remedy till the eruption is complete.

CCCCXIII. If no natural diarrhœa comes on, which is a critical effort at the termination of the diſeaſe, laxatives are particularly indicated, from the peculiar fœtor the ſtools then acquire; and the operation of laxatives is always attended with a certain relief of ſymptoms, and ſhould be continued ſo long as dullneſs and fever remain, till the appetite and ſpirits return.

CCCCXIV. Emollients, during the progreſs of the diſeaſe, to leſſen the irritation on the lungs, are highly proper; and, towards its termination, even an opiate may be employed with the ſame view. Bliſters may be occaſionally applied when the pectoral ſymptoms are urgent.

CCCCXV. Antimonials are highly uſeful through the whole of the diſeaſe, and will ſuperſede the uſe of laxatives if directed ſo as to affect the inteſtines.

CCCCXVI. When the preceding diſeaſe has been violent in its attack, where the uſe of the proper means have been omitted, and its attack at the ſame time has been upon a weakly ſcrofulous conſtitution, morbid conſequences then ariſe more ſerious in their iſſue than the diſeaſe itſelf: theſe are, peripneumony, ophthalmia, conſumption, and dropſy.

CCCCXVII. The firſt of theſe attends the ſudden retroceſſion, or premature departure, of the eruption; and it either occaſions the diſeaſe to prove quickly fatal, or it degenerates into conſumption.

CCCCXVIII. The ſecond, or ophthalmia, is particularly confined to the eye-lids, which continue for a great length of time ſore, ſwelled, and inflamed. This affection always ſucceeds an improvident application of cold.

CCCCXIX. The third, or conſumption, is alſo the effect of the ſame expoſure; and the prediſpoſition to this affection is ſo ſtrong, that every precaution ſhould be uſed where the ſmalleſt tendency to ſcrofula is diſcovered in the habit, to avoid it while a child is ſubjected to the attack of meaſles.

CCCCXX. The fourth, or dropſy, is rare; and, when it occurs, it is attended with an enlarged meſentery, and ſhows the exiſtence of the ſame ſcrofulous prediſpoſition already remarked.

Chicken-Pox (Varicella).

CCCCXXI. The chicken-pox reſembles the ſmall-pox ſomewhat in its general appearance; but it differs from them in its ſymptoms, in its progreſs, and in its duration.

CCCCXXII. With reſpect to the firſt, it is preceded by a ſlight and uncertain fever, never poſſeſſing the ſtrong continued form of ſmall-pox.

CCCCXXIII. In regard to its progreſs, the veſicle, which is ſmaller than that of ſmall-pox, and diſtinct, fills all at once, and retains its fluid appearance during the whole period of its duration.

CCCCXXIV. On the third it is obſerved, that its continuance never exceeds three or four days; a ſpace too ſhort for the duration of ſmall-pox.

CCCCXXV. The matter of chicken-pox, like that of ſmall-pox, is a ſpecific contagion, attacking but once in life, the action of which has neither powers to produce ſuppuration, nor yet tendency to gangrene, but occaſions merely a clear thin liquor to be effuſed into the veſicle.

CCCCXXVI. From the mildneſs of the diſeaſe, little is neceſſary in the treatment. A laxative or two is ſucceſſively repeated on the diſappearance of the eruption.

Inoculation.

CCCCXXVII. As the two diſeaſes of ſmall-pox and meaſles are ſo violent in their attack in the natural form, one out of every eleven dying from the ravages of ſmall-pox; and as few eſcape their attack beyond the age of ſeven or eight years, various attempts have been formed to induce a more favourable form of them by means of inoculation.

CCCCXXVIII. This proceſs we already conſidered in vol. I. p. 45. and alſo in vol. II. p. 68. It conſiſts in the introduction of a ſmall quantity of morbid matter through the external ſurface, ſo as to affect by its action, in a ſpecific manner, the whole ſyſtem.

CCCCXXIX. This operation has been practiſed in

a variety of ways, at different times, and in different countries. What we are here chiefly to consider are, *the proper period of its application, the cause of its mildness,* and *the circumstances necessary to a security against a future attack.*

CCCCXXX. In regard to the first, from a number of experiments it appears that inoculation succeeds best after the sixth month, and that children often escape the disease when exposed to it previous to that period; but, if left to choice, that the ninth or tenth month is the most favourable time.

CCCCXXXI. With respect to the mildness of the disease from inoculation, it depends on the operation alone; and, in proof of this, matter taken from a confluent small-pox has been found to produce a disease equally mild as that from the distinct kind. This is also verified in inoculation from the plague. The mildness of the disease may be even increased by attention in the performance of the operation; and avoiding, in introducing the lancet, to draw blood.

CCCCXXXII. In the last circumstance, or in order to ensure a remedy against future infection, it is absolutely necessary that the contagion affect the system in general, and show this effect by the presence of some degree of fever, however slight or short in its duration. Without this, the local effect in the inoculated part is not sufficient; and this general influence of the contagion or fever is enough, even though no apparent local change should follow. It is, therefore, the want of this general effect on the system that has occasioned the infection of small-pox to be received in cases where

inoculation, at a former period, has been performed; and, wherever no general eruption follows inoculation, the practitioner ſhould draw his opinion againſt the riſk of future infection more from this general influence or preſence of fever than from the apparent local effects in the inoculated part.

CCCCXXXIII. After inoculation, ſome reſtriction of diet is proper; and no animal food ſhould be allowed. An occaſional laxative may be alſo interpoſed; and, when the eruption appears, the ſame treatment is to be followed as that recommended in the diſtinct ſpecies of ſmall-pox. *Vide* vol. I. p. 42.

CCCCXXXIV. Inoculation for the meaſles, though it has been practiſed, is not general; but the ſame ſucceſs attends its application as for the ſmall-pox, the operation being here performed by a thread dipped in the blood.

Vaccine Diſeaſe.

CCCCXXXV. But, not ſatisfied with this mildneſs of the diſeaſe which the operation produces, practitioners of late have alſo joined to it a milder ſubſtitute, in the very principle of the infection or contagious virus, by the adoption of the cow-pox, or vaccine matter, for the variolous.

CCCCXXXVI. This matter has already been taken notice of in the former volumes (vol. I. p. 47, and vol. II. p. 69). It ariſes from a puſtule on the udder of a cow, in conſequence of infection, ſaid to be received from the diſeaſed heel of a horſe.

CCCCXXXVII. The appearance of this puſtule is commonly of a paliſh blue, or rather of a colour ſomewhat approaching to livid, and is ſurrounded by an eryſipelatous inflammation, which terminates frequently in ulceration, producing fever, and a leſſened ſecretion of milk in the animal.

CCCCXXXVIII. Infection from theſe puſtules is next conveyed to thoſe employed in handling the animal; and this infection appears in the form of inflamed ſpots, like veſications produced by a burn.

CCCCXXXIX. They are moſt frequent about the joints of the fingers, and at their extremities. They riſe in their progreſs into a circular form, with their edges more elevated than their centre, and of a colour diſtantly approaching to blue.

CCCCXL. From this ſuppuration of the puſtules, abſorption into the ſyſtem takes place, and the glands of the axilla ſwell, attended with quickened pulſe, ſtartings, general laſſitude, and pains about the loins and limbs; with vomiting, pain of head, and not unfrequently delirium.

CCCCXLI. The duration of theſe ſymptoms is from one day to three or four, leaving ulcerations in the primary affected parts, often difficult to heal, and producing ſores of a leſs virulent kind wherever the matter of theſe primary affected parts touches.

CCCCXLII. No general ſymptoms of cutaneous eruption attend this complaint, or are very trifling.

CCCCXLIII. The cow-pox affection, then, thus deſcribed, forms a certain preventative againſt the virus of ſmall-pox; and, conveyed by inoculation, produces alſo a milder diſeaſe than inoculation with the virus of this diſeaſe.

CCCCXLIV. It is performed in the ſame manner as with the virus of ſmall-pox, by puncture of the arm; and the ſymptoms take place much in the uſual time. On the ſeventh or eighth day uneaſineſs is felt in the axilla; this is ſucceeded by ſome chillineſs, loſs of appetite, and head-ach, and ſome degree of fever for a night.

CCCCXLV. The matter aſſumes rather more of a dark hue in the pock than that from ſmall-pox; and there is alſo more of eryſipelatous efflorеſcence.

CCCCXLVI. Eruptions rarely appear on the ſkin, but are confined merely to the inoculated part: under certain circumſtances they do ſhow themſelves, but are generally of a mild nature. The termination, however, is uſually eaſy, as in the other inoculation, particularly, it is ſaid, when the matter is taken from thoſe who have had the diſeaſe in its mildeſt form; and that an increaſing mildneſs of this matter ſeems progreſſively to take place.

CCCCXLVII. Though the facts on this diſeaſe are at preſent very numerous; yet a ſufficient interval of time has not as yet elapſed completely to aſcertain the point of its acting as a preventative againſt the virus of ſmall-pox. In the enthuſiaſm of innovation, facts are

often overlooked, conſidered as ſolitary, or forming but trifling exceptions to a general concluſion. Some of theſe at preſent exiſt, which have been attempted to be explained away: the cauſe of the virus itſelf, from the greaſe of the horſe, is now controverted by Dr. Woodville; and we are afraid the progreſs of time will contradict many other of the high-prized encomiums on the effects and conſequences of the diſeaſe.

Scarlet Fever (Scarlatina).

CCCCXLVIII. The ſcarlet fever, in infancy, is for the moſt part of the typhoid form, with or without an affection of the throat, and always marked by a roſy efflorescence of the ſkin.

CCCCXLIX. This diſeaſe we formerly conſidered in a general way, in vol. I. p. 49. It begins with the uſual ſymptoms of languor, debility, pain of head, and hurried circulation. The eyes are particularly affected, with ſtiffneſs of the neck, ſucceeded by affection of the throat; and theſe ſymptoms may be conſidered as being diagnoſtics of the diſeaſe till the efflorescence ſhows itſelf, which is on the ſecond or third day generally, firſt on the face, neck, and breaſt.

CCCCL. The ſymptoms of fever at this period conſiderably increaſe, particularly the pain of the head, with ſomething of a comatoſe ſtate. The tongue changes from the uſual white appearance of fever to a ſcarlet red; but, about the fifth day, ſome remiſſion

appears, and, the eruption decreasing, disappears about the seventh.

CCCCLI. The usual symptoms of lowness and depression that succeed fever are then experienced; and some weeks expire before health is restored.

CCCCLII. In the treatment of this fever the indications formed are, to counteract the general febrile state of the system, and to obviate the local affection of the throat.

CCCCLIII. The first is regulated by the violence of symptoms, and the greater or less tendency discovered to a putrid termination. Whenever the disease is epidemic, the typhoid form constantly exists; and then the bark, wine, and antiseptics, become the chief remedies. The bark is best exhibited in a liquid form, and its tendency to purge counteracted, when necessary, by opium. When, on the contrary, the disease is sporadic, saline draughts and antimonials may be trusted to.

CCCCLIV. The affection of the throat requires, at all times, frequent syringing with mucilaginous gargles, rendered active by acids or other antiseptics, as tincture of myrrh, snake-root, or spirit of ammonia; and the frequency of doing is of great consequence in early infancy.

CCCCLV. When much swelling attends this affection of the throat, blisters, being then indicated, may be applied.

CCCCLVI. The affection of the throat is ſometimes known to increaſe as the efflorescence decays, and even to aſſume a gangrenous appearance; but this appearance ſeparates without any eſchar being thrown off.

CCCCLVII. The diſeaſe, on its departure, is frequently ſucceeded by anaſarca; but this, in infants, is very partial, and ſoon yields to the common means of purging.

CCCCLVIII. The prognoſis in this diſeaſe, in infancy, is leſs favourable than in adults; but our opinion muſt be regulated by the apparent putreſcent tendency; for, at this early period of life, a number of children ſink under it.

Miliary Fever (Miliaria).

CCCCLIX. The miliary fever is a diſeaſe rarely attacking children, unleſs epidemic; and then it is diſtinguiſhed by the uſual ſymptoms, as in other caſes.

CCCCLX. Theſe ſymptoms are, fever, with much itching of the ſkin, and profuſe perſpiration, which terminates in a meaſle-like eruption, and remiſſion of ſymptoms, on the third or fourth day. The eruption, however, varies its appearance in different caſes, at times forming ſmall pimples, of a pellucid appearance, called cryſtallines; and at times appearing in long red ſpots, reſembling the ſcarlet fever.

CCCCLXI. During the period of eruption the feveriſh ſymptoms continue with ſome violence; and no

proper or continued remiſſion occurs till the eruption begins to dry.

CCCCLXII. The treatment here is ſimilar to that in typhus, of which it partakes. Wine ſhould be exhibited in the form of white-wine whey, or mixed with the food. Cordials, as the confectio aromatica, the camphorated mixture, volatile alkali, compound ſpirit of vitriolic æther, and even bliſters, will be indicated by the degree of debility; and, where real putreſcent ſymptoms appear, the bark may be had recourſe to.

CCCCLXIII. The primæ viæ are to be kept clear by rhubarb or glyſters, the ſituation of the child kept cool, and cold acidulated drinks the only beverage allowed.

Contagious Chronic Eruptions.

Scald Head (Tinea).

CCCCLXIV. Tinea conſiſts in a ſcaly eruption of the ſkin of the head or hairy ſcalp. It is attended with various degrees of acrimony, and becomes accordingly more or leſs infectious in its nature.

CCCCLXV. It ariſes from an obſtruction of the ſmall glands at the roots of the hair, which, paſſing into ulceration, produce, by the acrimony of their contents, the common form of the diſeaſe.

CCCCLXVI. In directing the cure of this affection, its particular extent or progreſs is to be conſi-

dered; and in every caſe it is to be held that it exiſts merely as a topical affection, and is to be chiefly removed by topical means.

CCCCLXVII. When the diſeaſe is incipient, ſimply ſtimulating the veſſels of the part, ſo as to reſtore their circulation, will be ſufficient; and, for this purpoſe, the ſulphur ointment, with a proportion of ☿ or muſtard-flour, will anſwer, rubbed in once or twice a day.

CCCCLXVIII. When the diſeaſe is more general, the head may be firſt bathed with the ſaponaceous or tobacco lotion twice a day, and the ſcabs then anointed with the ointment of nitrated ☿.

CCCCLXIX. When the ſcurfs, beſides being general, are thick and riſe high, the head muſt be firſt cloſe ſhaved, then waſhed with a ſolution of ſoap and the pitch ointment, with a proportion of hellebore powder rubbed in warm for a long time; and it is then to be covered with a wax cap. On the hairs ſeparating they are to be removed, when a new growth will take place. The repeated application of bliſters will have the ſame effect.

CCCCLXX. When the eruption is ſomewhat of a dry chronic nature, mild alteratives may be exhibited internally, as preparations of ſulphur or ☿, with the decoction of the woods. When the difficulty lies in the extraction of the hair, the pitch-plaſter, or the application of lime, will remove it.

CCCCLXXI. In moſt caſes of tinea, eſpecially when

extenſive, an iſſue or ſeton in the nape of the neck is uſeful.

CCCCLXXII. Simple ſcurfineſs of the head, independent of diſeaſe, often takes place from dirtineſs; and even without this, at times, as an effect of teething.

CCCCLXXIII. Combing and waſhing are the only means here neceſſary; and theſe may be aſſiſted by anointing the head occaſionally with cream when dry; or, if moiſt, mixed with arquebuſade water.

Itch (Pſora, Scabies).

CCCCLXXIV. This diſeaſe we already conſidered in vol. I. p. 221: it is chiefly introduced here to remark ſome peculiarities in its treatment in infancy.

CCCCLXXV. In no caſe ſhould the cure ever be truſted to external means without the exhibition of internal remedies. Sulphur and mercurials are the chief means of cure. The true or contagious itch yields readily to the former: when it does not, the diſeaſe is more of a mixed or ſpurious nature, and may then be attacked by mercurials, to which an alterative decoction ſhould be joined.

Shingles (Herpes).

CCCCLXXVI. The herpes, or ſhingles, is of two kinds; the miliaris, or ring-worm, and the exedens.

CCCCLXXVII. The former is moſt common, and deſcribed in vol. I. p. 220. It is attended with conſiderable itching, and is often alſo of a critical nature, and connected ſomewhat with a general affection of the ſyſtem.

CCCCLXXVIII. From its general appearance, eſpecially on parts expoſed, as the hands and face, its removal becomes abſolutely neceſſary, and it generally yields to the uſe of ſtimulant and aſtringent applications, as an infuſion of galls, a paſte of ink with muſtard flour, ſpirit of wine, ſaturnine applications in lotion or liniment, white vitriol ointments, or ointments with calcined zinc or nitrated mercury.

CCCCLXXIX. The ſecond, or more virulent form, is properly a ſpecies of ulcer, and is to be treated firſt with aſtringent or ſaponaceous waſhes, then tried with nitrated mercury in liniment; but, failing the efficacy of theſe means, the ſores may be touched with cauſtic.

CCCCLXXX. Alterative decoctions ſhould be employed internally during this local treatment.

Venereal Diſeaſe of Infancy (Lues Infantum).

CCCCLXXXI. The venereal diſeaſe of infancy we formerly treated in vol. I. p. 158; but not in the full manner the importance of the ſubject requires: we ſhall therefore enter upon it here at large.

CCCCLXXXII. The lues of infancy we find generally diſplays itſelf firſt about the genitals and nates; more rarely it attacks the face, breaſt, and lower extremities. Its appearance in theſe ſituations is firſt in the form of copper-coloured puſtules, ſimilar to what diſtinguiſh the ſecond ſtage of the conſtitutional diſeaſe in the adult. Theſe puſtules ſpread, and the body is covered with an appearance from them of what are commonly named *ſcorbutic ſpots*. Inſtead of puſtules, however, it is frequently obſerved in the form of livid blotches. Whichever of theſe appearances it aſſumes, it continues to ſpread about the face, eye-brows, chin, &c. having the ſame appearance as when recovering from the confluent ſmall-pox. The mouth alſo comes internally to be affected; and here it diſplays an appearance ſimilar to aphthæ. Theſe change into ſores, and gradually ſpread backwards to the fauces, and forwards to the lips and noſtrils; occaſioning ſtoppage of the noſe, difficulty of breathing, and other ſymptoms attending an impeded action of theſe parts. The nurſe's nipples then begin to turn raw, and to aſſume the appearance of chancre; and in this way the diſeaſe is tranſmitted from the child. With time, the body of the child becomes wholly covered with ulcerations; but, before arriving at this height, the conſtitutional diſeaſe generally diſplays itſelf on the nurſe by ulcerations of the throat.

CCCCLXXXIII. The eyes and the ears of the child become alſo, in the progreſs of the malady, conſiderably affected by matter forming in theſe parts; and in proceſs of time, if the diſeaſe is not removed, hectic ſymptoms coming on prove fatal. The affection of the

eyes is very characteriſtic of this ſpecies of lues, and has been particularly remarked by the phyſicians of the Venereal Hoſpital for Children in Paris.

CCCCLXXXIV. The time at which the diſeaſe appears in children is moſt frequently in ten days or a fortnight after birth: and, previous to this, the child is apparently healthy, and the ſkin clear and ſmooth. At other times, however, it is coeval with birth, or appears much earlier.

CCCCLXXXV. From this deſcription, the peculiarities that may be remarked in this ſpecies of lues are;

1. With reſpect to its different appearance; and,
2. The mode of infection.

CCCCLXXXVI. The chief circumſtances in which it differs from the conſtitutional diſeaſe of the adult are;

1. In ſhowing a ſpecific attraction to the genital parts, independent of the mode of introduction.
2. In diſplaying no primary action; and,
3. In diſcovering no tendency at firſt to affect the throat.

CCCCLXXXVII. The cauſe of the firſt of theſe cannot be explained; and all poiſons, we find, poſſeſs a ſpecific attraction to particular parts.

CCCCLXXXVIII. With reſpect to the ſecond, even at times in the adult there is very little primary operation of the virus, as in the lymphatic chancre; and we

find that exceſs of ſecretion in parts diminiſhes the action of the virus on its introduction. In the fœtus and in childhood, the activity of the lymphatics is not equal to what is obſerved afterwards; and the larger veſſels poſſeſs then more power. Hence we ſuppoſe, that from the exceſs of fluids in the habit of the fœtus, and the ſmall activity of the lymphatics, the virus may be introduced without any local effects, till it is determined by receiving a new ſtimulus from the force of the circulation to the parts it attacks.

CCCCLXXXIX. The third circumſtance, or its ſmall tendency to affect the throat at firſt, may be explained by obſerving, that though between the genital organs and the throat there prevails a remarkable ſympathy, as allowed by all authors, yet this does not take place till the genital organs become fitted for executing their proper offices, as diſplayed by the changes they receive at the age of puberty. Till the age of puberty, then, there is no particular irritation on theſe glands to produce this ſympathy, while the natural determination of the circulation being to the ſkin, the diſeaſe therefore appears chiefly here.

CCCCXC. The mode of infection in this caſe is a ſubject attended with ſome difficulties; and we conſider it as derived either from the male or female.

CCCCXCI. The firſt of theſe is perhaps the rareſt; but that the ſemen may be conveyed to the uterus in a vitiated ſtate, by accidental contamination in its paſſage through the urethra, is not to be doubted. How it afterwards acts, it is impoſſible to explain; yet the fact

is ſufficiently certain, that children are every day born with appearances ſimilar to lues, where no taint ever prevailed in the habit of the mother, and where, therefore, we have reaſon to ſuppoſe the original ſtamina, at the time of impregnation, received ſome morbid change.

CCCCXCII. The ſecond mode of infection, or from the female, is by far the moſt frequent; and it may be communicated here, either,

1. By the virus circulating in the general maſs; and determined, without affecting the mother, through the circulation of the placenta, to the child.

2. By contamination in its paſſage through the vagina at delivery; or,

3. By ſuckling from an eroſion of the nurſe's nipple.

CCCCXCIII. The firſt of theſe is conſidered by Mr. Hunter as barely probable; but it is a known fact, that the contagion of ſmall-pox has been conveyed to the fœtus without affecting the parent; and we have reaſon, therefore, to ſuppoſe, that other contagions may be conveyed in a ſimilar way. We admit, at the ſame time, that it is not a conſtant effect, as contagions affecting the mother ſeem alſo often eſcaped by the fœtus; yet where the virus exiſts in the circulation of the parent, from the increaſed determination to the uterus favouring its depoſition, it may be communicated in this way.

CCCCXCIV. From this reaſoning, then, we conclude, that where a child is born with ſymptoms of

lues, as deſcribed, or rickets appear ſoon after birth; or where a woman repeatedly miſcarries, without any evident cauſe, about the ſixth or ſeventh month, and the child is expelled dead or in a putrid ſtate; or if the motion of the child formerly felt ceaſes at that period, though it is retained for the nine months, being then born in the former ſtate; or, if living, ſo ſhrivelled and emaciated in every part as to bear the marks of old age—an appearance ſtrongly remarked by the phyſicians of the Venereal Hoſpital for Children at Paris; in all theſe caſes, the infection has either been communicated from the father, or in this way. But as other infections, it was remarked, are not always communicated in this way, though exiſting in the ſyſtem of the mother, it is therefore moſt probably owing to the father; and the removal of infection in him alone is to be conſidered as the only means of preſerving the future offspring, or guarding againſt thoſe hereditary affections to which they appear ſubjected.

CCCCXCV. The ſecond mode of infection, or by the vagina in its paſſage at delivery, is more frequent than the former. It was firſt taken notice of by Dr. Hunter; who remarked, that the diſeaſe did not appear till ten days or a fortnight, for the moſt part, after birth; in which period the virus had time to be fully introduced into the ſyſtem. The inactive ſtate in which the virus frequently remains in the vagina ſtrongly favours this opinion: and hence, even where no venereal ſymptom can be traced in the mother, we find that the fœtus often diſcovers the infection ſoon after birth; and that, by putting the mother ſolely on a mercurial courſe, the diſeaſe may in a

future delivery be prevented. Dr. Swediauer has supposed, that in this way alone the venereal disease can be conveyed to the fœtus, if we may make any conclusion from what he delivers; for he has doubted, whether the disease has ever appeared in children at birth. Of this, however, there have been many instances. Wherever, therefore, the child has been born with marks of infection, the mother should not be put on a mercurial course unless she suckles, as the infection is probably derived from the father solely. Where, again, the disease does not appear for some time after birth, or the period mentioned in the history, it is then to be considered as owing to the virus derived from the mother, and a mercurial course recommended to her. It is a matter, indeed, of the utmost importance, to be able to detect to which of the parties the infection of the child is owing, as it is only by this we can be able with certainty to effect a cure. It is often attended with considerable difficulty, and can only be known from the previous history of the patient; but as this, in the case of the female, we can hardly learn, (for delicacy forbids such an inquiry,) we can only judge from the time of appearance, and other circumstances in the infection of the child. On this account, indeed, it will be generally most proper that both parties are put on a course of medicine; and in such situations, as the infection is chiefly communicated by the genitals, particular attention ought to be paid to their state.

CCCCXCVI. The last way in which we mentioned infection can be conveyed to the child, is by means of the nurse; and to determine whether the contagion is received in this way is sometimes pretty difficult. If,

however, the firſt ſymytom on the child is the aphthous appearance of the mouth, there is great ſuſpicion of it; for we find, that this affection of the mouth does not occur for ſome time when the infection is not received from the nipple. And ſome authors have even alleged, in proof of this, that if mercury is given immediately to the child, on the firſt marks of the diſeaſe, no infection will often be conveyed to the nurſe, as the progreſs of the diſeaſe is thus ſtopped, and the affection of the mouth prevented. The character of the nurſe, her connections, and the examining her ſtate of health at the time, will be able to give ſome farther information, and particularly if her own child has been ſtill-born; or, if alive, whether there are any marks on it of the preſent diſeaſe, or whether the woman ſuckling it has any affection of her breaſt. The nipple, alſo, of the nurſe herſelf, is always here more or leſs affected, though it is at times ſo ſlight as hardly to bear detection; yet, without this, we conceive that the diſeaſe could not be communicated, as no matter could be formed to produce the contagion; and we know, that the milk itſelf is entirely free from the diſeaſe. Where, again, the diſeaſe is communicated from the child to the nurſe, the nipple of the nurſe becomes ſwelled and raw, ſmall veſicles appear on it, which degenerate into chancres; and theſe are ſucceeded ſometimes by an eryſipelatous eruption, ſimilar to herpes, on the breaſt itſelf; but more frequently the neighbouring glands of the axilla ſwell, and the lymphatics are felt from the ſeat of the infection in the nipple towards it in the form of a ſtraightened cord; and the diſeaſe, being thus introduced, ſoon diſcovers itſelf by the ſame appearances which attend its conſtitutional operation in

the adult, though it often here displays a virulence uncommon to what is observed where it is first introduced by a primary action on the genital system: and several most lamentable instances are to be met with in different publications of the effects of venereal infection communicated in this way.

CCCCXCVII. Having thus pointed out the circumstances which distinguish this disease in children, and the various ways in which the infection may be conveyed, we proceed, in the last place, to consider the method of cure.

CCCCXCVIII. By many authors, the venereal disease in children has been considered as incurable. This is, however, by no means the case: and those acquainted with practice will find it the reverse; for it yields much more readily to the use of mercury than in the adult. Children, however, are more easily cured before than after weaning; and those born with the disease are more difficult to cure than those who receive the infection at birth, or afterwards from the nurse. It is also to be remarked, that from the calculations of the physicians attending the Venereal Hospital for Children near Paris, it appears that a greater proportion of infected children survive childhood than of healthy children entrusted to the care of common nurses.

CCCCXCIX. In curing the lues of children, there are two ways of exhibiting mercury; either by giving it to the nurse or the child.

D. In giving it to the nurſe, we are leſs ſenſible of its operation; and, before her fluids are impregnated, there is danger of the child ſinking under the diſeaſe. From the experiments of the late Dr. Young, it was found even difficult to impregnate the milk; and the cure ſucceeding in this way he has attributed rather to the mercurial atmoſphere in which the child, from ſleeping with the nurſe, and by being kept conſtantly in her arms, is confined. This difficulty, however, of impregnating the milk is denied by another author; who obſerves, that, by evaporating a quantity of it, it generally poſſeſſes ſo much mercury as to bear detection. But as it is often difficult to procure a nurſe who will undertake the taſk of ſuckling ſuch children; and the mother, if diſeaſed herſelf, ſhould never be allowed to do it; it has been propoſed to impregnate with mercury the milk of other animals, and in this ſtate give it to the child. Thus, in Van Roſenſtein's treatiſe, we find directions for clearing the ſkin of a goat of its hair, and rubbing it with mercurial ointment, which is to be performed in the ſame manner as in the common method by frictions; when, its fluids coming to be loaded with the remedy, it will thus be conveyed in an eaſy and ſafe manner to the child.

DI. The exhibition of mercury to the child itſelf is a practice now more generally followed; and as a very ſlight irritation from it is here ſufficient to effect a cure, in order that this irritation may not be too ſtrong, thoſe preparations are to be preferred which have a tendency to paſs off by the bowels, by which any exceſs of irritation is prevented; and, from the quantity of fluids in the infantine ſtate, this evacuation, unleſs

carried far, is not attended with that debility which follows ſo remarkably any increaſed diſcharges in the adult. Children poſſeſs at the ſame time, though thus ſuſceptible of the ſlighteſt irritation, little tendency to ſalivation; which would ſhow, that the lymphatic ſyſtem is not in the ſame ſtate of activity as afterwards. As a proof of the ſmall tendency they poſſeſs to ſalivation, a caſe uſed to be mentioned by the late Dr. Young, of Edinburgh, where 12 doſes of calomel were given to be uſed in 12 days; by miſtake, however, the whole number was uſed in 6, and the child was much relieved, though not the ſmalleſt ſymptoms of ſalivation appeared. In ſupport of what was mentioned, that a very ſlight irritation will cure the diſeaſe in children, we find that the guaiac, and the other woods which in this climate have little effect on the adult, frequently perform a cure here.

DII. The preparations of mercury commonly employed in this caſe are, the calomel, and Van Swieten's ſolution. The former of theſe is generally exhibited in the quantity of a grain every night; and, after ſix or eight doſes, a ſenſible amendment is perceived. The ſame doſe is then repeated at the diſtance of every ſecond night; and, in twelve days longer, the diſeaſe is commonly removed. Where the ſolution, again, is employed, thirty drops make a ſufficient doſe, and it ſhould be given in milk. The ſame rules are to be obſerved in continuing it as with the calomel, and the ſame ſucceſs may be expected. It is the favourite remedy of Van Roſenſtein in the venereal complaints of children; and, wherever given in an increaſed doſe,

it has a tendency, like the calomel, to pafs off by ftool.

King's Evil (Scrofula).

DIII. Scrofula is very various in its appearance, and extended in its feat. Its primary fymptom is the fwelling of the lymphatic glands, ending in ulceration: this ulceration extends it to other parts; and, in its progrefs, the whole of the fyftem appears to take on the morbid ftate.

DIV. The previous fymptoms of this difeafe are, often, a peculiar look about the eye, and a remarkable thickneſs of the upper lip; frequently, alfo, an enlarged belly.

DV. If not originally induced by it, the cauſe of this malady is often at leaft brought into action by preceding difeafe, or that ftate of debility which preceding difeafe creates. Hence it is known to follow fmall-pox and meafles, hooping-cough, and teething.

DVI. Scrofula ſeldom appears before the age of two years; and it alſo departs, in its external forms, at the age of puberty. The period, therefore, which ſucceeds teething, and precedes puberty, is the diſtinguiſhing æra of its attack.

DVII. The cauſes of ſcrofula are ſtill uncertain. Chemiſtry has detected a fault in the fluids, and

the apparent ſtate of conſtitution ſhows equally a debility and laxneſs of the ſolids. Theſe faults will naturally be increaſed by accidental circumſtances. Hence we find the diſeaſe moſt prevalent in a cold damp ſituation, and increaſed by whatever deprives the body of its due nouriſhment, or conveys it of an improper kind.

DVIII. The prognoſis in ſcrofula is determined in general by its particular form. The external ſpecies are ſeldom attended with danger, unleſs the ulcerations are very extenſive: the internal forms, again, are generally fatal. The diſappearance, alſo, of the diſeaſe, in any particular form, does not ſecure againſt a future attack.

DIX. The general treatment is alſo regulated by the ſame circumſtances.

DX. The ſwelling in the firſt ſtage will frequently yield to local ſtimulants, as ſlight mercurial friction, ſo as to paſs through the glands: fumigations, alſo, with ſulphurated mercury, diſcutients of various kinds, as taken notice of in vol. II. p. 435, particularly a ſtrong ſolution of camphor in oil. When theſe means fail, ſuppuration ſhould then be induced as quickly as poſſible by a ſuppurative cataplaſm, or a bliſter, and even electricity to the part, with the uſe of ſtimulants internally.

DXI. When ulceration has once taken place, the employment of the tonic plan becomes highly ne-

ceſſary, occaſionally interpoſing neutral ſalts, and joining to the internal tonics the uſe of ſea-bathing. This treatment, however, is only ſuited to the milder forms of the diſeaſe, and is farther detailed in vol. I. p. 185, and in vol. II. p. 117 and 149. The particular treatment of internal ſcrofula requires a more ſpecial detail.

Watery Head (Hydrocephalus).

DXII. Hydrocephalus, or the watery head, is a diſeaſe peculiar to infancy. It is of two kinds; the external and internal. The former is generally coeval with birth, or precedes it: the latter, however, is moſt frequent in its occurrence, and generally fatal in its termination.

External.

DXIII. In the external hydrocephalus, the ſeat of the fluid is the ſurface of the brain. Such children are often ſtill-born; but it frequently appears immeately after birth, and in this caſe the treatment ſhould be truſted to a frequent application of bliſters, placed ſo as to affect the different ſinuſes, eſpecially the longitudinal one, and to promote a diſcharge from that ſituation ſo as to remove the internal accumulation; and life is often protracted till the head acquires a moſt ponderous and unwieldy ſize.

DXIV. Though ſome inſtances of cure may happen from this plan, the diſeaſe is in general fatal.

Internal.

DXV. In the internal hydrocephalus, the depoſition of the fluid takes place in the ventricles.

DXVI. This diſeaſe is diſtinguiſhed by pain of head, acroſs the brow, accompanied with nauſea, ſickneſs, and other diſorder of the animal functions, without any evident cauſe, and ſudden in their attack; variable ſtate of pulſe; conſtant ſlow fever; and, in the advanced ſtage of the diſeaſe, dilatation of the pupil of the eye, with a tendency to a comatoſe ſtate.

DXVII. The diſeaſe is almoſt peculiar to children, chiefly to thoſe of a ſcrofulous habit. Its attacks are ſeldom known to extend beyond the fourteenth year.

DXVIII. It has been divided into *three* ſtages, in its progreſs.

DXIX. The *firſt* is marked by loſs of appetite, and a degree of melancholy and uneaſineſs, without the child being able to fix on any particular ſymptom. Pain in the head is next felt, eſpecially above the eyes, and in a direction betwixt the temples. This tenſive pain gradually extends, and is at laſt felt more particularly in the arm and leg of one ſide. The affections of ſtomach next commence, and alternate with the pain and uneaſineſs of the head. The febrile ſymptoms, though pretty conſtant, are milder in the morning, but ſuffer always an evening exacerbation. Vomiting occaſion-

ally occurs, but coſtiveneſs is a leading ſymptom: the tongue is little affected, except towards the end, when it aſſumes a ſcarlet colour, and ſometimes becomes aphthous. As the diſeaſe ádvances, all the ſymptoms of hectic are conſpicuous: and, during the whole diſeaſe, the child ſhows a ſtrong propenſity to the bed, or a deſire to avoid being moved.

DXX. In the *ſecond* ſtage, a remarkable alteration takes place in the pulſe, which becomes ſlow and heavy. The diſeaſe alſo is ſtrongly marked by the ſtate of the eyes, and a dilatation of the pupil is obſervable; ſometimes even double viſion prevails. The child alſo ſcreams out without being able to aſſign a cauſe, and his ſleep is in general diſturbed.

DXXI. In the *third* ſtage, the pulſe returns again to the febrile ſtate, becoming uncommonly quick and variable; and convulſive ſymptoms take place. Though the diſeaſe generally proceeds in the manner deſcribed, yet ſometimes it is ſudden in its attack.

DXXII. Our opinion in this diſeaſe is always unfavourable; and, wherever recovery has taken place, we have reaſon to think the phyſician has been miſtaken in the malady. It is moſt frequent in its attack from two to ten years.

DXXIII. Diſſections here ſhow different morbid appearances of the brain; moſt commonly there is from four to ſix ounces of ſerous effuſion within it; at other times the organ appears, as it were, gorged with blood; collections, alſo, of a viſcid tenacious matter, have been

found in cysts upon the external surface of the brain, and tumors attached to its substance.

DXXIV. In the treatment of the disease, three indications are formed:

1. To relieve the urgent symptoms, particularly those of the head.

2. To discharge the contained fluid; and,

3. To restore the habit impaired by the disease when the former are successful.

DXXV. The first is effected by topical bleeding, with leeches applied to the temples, or from the jugular vein; which may be followed by the use of blisters, or the formation of issues, while the symptoms of sickness and vomiting will be alleviated by the saline julap and absorbents, to which the addition of an opiate may be occasionally made.

DXXVI. The second indication is to be chiefly accomplished by the use of mercury, either in the form of calomel, given in small doses, or by unction applied as near as possible to the seat of the disease, or about the head.

DXXVII. The same has been also attempted by diuretics, though less successfully, as the foxglove, cream of tartar, &c.

DXXVIII. The third consists in the use of tonics, the best of which is the cold bath and the bark.

DXXIX. From the incurable nature of *hydrocephalus*,

its prevention becomes an object of peculiar importance. Hence has been recommended the early introduction of an iſſue in the head, in all caſes of prediſpoſition.

Meſenteric Fever (Febris Meſenterica).

DXXX. Meſenteric fever is moſt common in its attacks from the age of three or four years. It is irregular in its paroxyſms, occaſionally remitting, and at other times entirely intermitting. It is attended with loſs of appetite, ſwelled belly, pain of bowels, daily attacking, and alternating with periods of eaſe, and ſome days it is entirely abſent. The child ſenſibly falls off; it cannot walk, if formerly able to do it; and inclines to lie much in one poſture, from the languor and debility induced; a general flaccidity and paleneſs of countenance is conſpicuous; and, in the progreſs of the diſeaſe, the meſenteric affection becomes viſible, by the increaſed ſize of belly, its hardneſs, and pain.

DXXXI. From this period the hectic is conſtant, and little remiſſion occurs. There prevails much thirſt, and a fœtid breath. A fœtid frothy diarrhœa ſupervenes, which proves fatal; or the child, without this, is cut off by a gradual waſting, without any ſtrong aggravated ſymptoms.

DXXXII. This diſeaſe rarely occurs after the age of eight or ten; but it is very frequent before this period, and is promoted by all the complaints of childhood, which render active the ſcrofulous prediſpoſition.

DXXXIII. The treatment of the diſeaſe varies ſomewhat according to its different ſtages.

DXXXIV. In the firſt ſtage, the chief ſymptoms are ſlow belly, recurring abdominal pain, and intermittent fever. Theſe ſymptoms are counteracted by firſt opening the bowels, and then beginning a courſe of calomel, in ſmall doſes, given every other day, and alternated with neutral ſalts. On the remiſſion of fever, ſome light chalybeate, or other tonic, is then to be employed.

DXXXV. The ſecond ſtage, again, when the abdominal affection is more permanent, is marked by ſimilar emaciation of the extremities, as well as the increaſed abdominal ſize, and by a loſs of colour and general hectic ſtate. In this ſtate the treatment depends entirely on reſolution of the ſwelling, and which has chiefly been attempted by mercury and ſteel. Mercury, in this ſtage, has been often introduced by friction, joined with volatile liniment; and this or calomel is the beſt form, or elſe by clyſter, as recommended by ſome writers. At any rate, friction is well adapted as an auxiliary means to the relief of this diſeaſe, and ſhould be employed daily, joined with ſtimulating plaſters or oils.

DXXXVI. During the progreſs of the mercurial courſe, the occaſional interpoſition of neutral ſalts ſhould take place; and the mercurial may be alſo joined with a narcotic, as the cicuta.

DXXXVII. If the ſymptoms yield to theſe means,

tonics become then the next resource to obviate the consequences of the preceding affection; and the best with this view are the bark, steel, and cold bathing. Both the bark and steel should be given in a fluid state; the former in decoction, the latter as a chalybeate water.

DXXXVIII. Besides medicine, diet here claims a chief consideration. All coarse diet is pernicious: the lightest and most nutritious should be employed, and all fat and greasy aliments avoided.

Hectic Fever (Hectica).

DXXXIX. Hectic fever may be termed the general and fatal termination of all protracted complaints both in infancy and age: it is, therefore, entirely symptomatic, and can hardly be disjoined from the particular complaints with which it is present and connected.

DXL. In infancy, however, some species of hectic are found to terminate in health, and particularly that from worms or teething. Here recovery frequently takes place beyond the idea of hope, and that so rapidly as to bear no proportion with the preceding period of illness. In forming a prognosis, therefore, on the termination of the infantine disease, much caution is often necessary.

DXLI. For the treatment of hectic, in infancy, the particular nature of the primary disease must be the leading direction. Attention must also be paid to the

particular state of the primæ viæ, to a proper choice of diet, and to such a proportion of exercise as the weakness of the child will allow.

Rickets (Rachitis).

DXLII. Rickets consist in an enlargement of the head anteriorly, and in a swelling of the joints, flattened ribs, protuberant belly, and general emaciation, with a bloated or florid countenance.

DXLIII. This disease we already described in vol. I. p. 183. It is evidently, from its history and the period of its first appearance, the product of refinement, and the effect of that artificial mode of life the progress of civilisation has introduced.

DXLIV. It is found particularly to follow bad management, as exposure to cold and wet, and a weak watery diet. Hence it is more frequent in the lower than in the higher orders of life. Its appearance, also, is often the effect of preceding complaints exhausting the vigour of the constitution; and it is alleged to be the frequent consequence of hereditary diseases in the father, or long-continued venereal complaints.

DXLV. The most frequent period of its attack is from nine months to two years. It is marked by a general falling off of the flesh and strength. The child loses its colour, becomes weak, and dislikes to stir. The enlargement of the bones, the distinguishing fea-

ture of the diſeaſe, then commences; and they gradually ſwell and ſoften, ſo that little depoſition takes place of their earthy part. This ſwelling is moſt remarkable at their joints, and gradually extends to every part of the bony ſyſtem, if not interrupted by ſome favourable circumſtance in the change of conſtitution, or in the particular treatment.

DXLVI. With this ſtate of the oſſeous parts there prevails a quick feeble pulſe, an early decay of the teeth, which rot and fall out, and a premature underſtanding for the age of the child.

DXLVII. Our opinion, as to life, is generally favourable in this diſeaſe; for, though the appearances are ſo unpromiſing, the diſeaſe ſeldom proves fatal.

DXLVIII. To invigorate the ſyſtem is certainly the leading indication of cure, and that chiefly by increaſing the depoſition of earthy matter which ſeems deficient in the bony ſyſtem. This is done in three ways:

1. By abſtracting the quantity of fluid nouriſhment as much as poſſible, by a diet in which a greater proportion of animal food prevails; or elſe, where vegetable food is uſed, by employing it in moſt ſtimulant forms.

2. By the uſe of tonics, eſpecially thoſe of an aſtringent nature, as the chalybeates and bark, premiſing and alternating their exhibition with an occaſional emetic or laxative, of a warm ſtimulant nature.

3. By the application of the external means of exerciſe, friction, and cold bathing, all tending to diſſipate

the more fluid parts, and to give firmneſs and conſiſtency to the ſolids.

DXLIX. The friction ſhould here follow the cold bathing, and be joined with ſome of the ſtimulant oils to aſſiſt its effect, as the ſkate oil, which has been highly commended.

DL. In very young children, the cold bathing has been directed to conſiſt merely of daſhing the face occaſionally with cold water, in a gentle manner, ſo as to occaſion an exertion of its muſcles; or to wrap the extremities round with cold clothes, dipped in ſpirits and water.

DLI. In a certain time, by regimens alone, the diſeaſe is recovered; and that often without the uſe of medicine at all.

Difficulty of Urine, with Mucous Diſcharge.

(Iſchuria Mucoſa.)

DLII. A mucous diſcharge from the bladder, or a ſpecies of iſchuria, is frequent in infancy, during the period of teething and the progreſs of different inflammatory affections.

DLIII. This affection is marked by pain in the diſcharge of urine, a frequent deſire to void it, or with pain on the firſt attempt. The urine itſelf diſplays alſo a morbid ſtate, being either mixed with a thick mucus, or tinged with blood; or it ſhows ſmall coa-

gula, intermixed with the diſcharge, that fall to the bottom.

DLIV. This diſeaſe is moſt common to children of a delicate irritable habit. It differs from that of age merely in its being leſs violent in its ſymptoms, and therefore admitting more ſpeedy relief.

DLV. This affection, though alarming in appearance, is merely of a temporary nature, and generally yields in a few weeks, on removal of its primary cauſe.

DLVI. The cure is to be attempted at firſt by diluents and emollients, in order to leſſen the action of the irritating cauſe, or the urine itſelf on the organ. When theſe fail, and the firſt ſtage of inflammation is paſſed, tonics, reſtringents, balſamics, and alkalies, will be all found effectual, on different occaſions, in completing a cure.

DLVII. Should the diſeaſe prove recurrent after being once cured, it has been known to yield to the golden rod, in infuſion, in moderate doſes.

Suppreſſion of Urine (Iſchuria Renalis).

DLVIII. Suppreſſion of urine, from impeded ſecretion, is known to occur, though a rare diſeaſe, in infancy; and the want of accumulation, or pain in the lower part of the belly, marks it from this cauſe.

DLIX. It is preceded by ſome fever, generally ſlight, and attended with diarrhœa and vomiting of a bilious nature: a ſuppreſſion or diminiſhed excretion of urine then comes on, which gradually increaſes for twenty-four hours, when the child is unexpectedly cut off.

DLX. The cauſe of this diſeaſe appears, by diſſection, to be inflammation, and its conſequences. The ſeat of it is found to be the meſentery, from the latter communicating to the kidneys.

DLXI. The treatment muſt be directed entirely to obviate inflammation, by the application of leeches to the belly, a bliſter to the ſacrum, and the repeated uſe of the warm bath, with occaſional laxatives and diuretics of a cooling nature interpoſed. In ſpite of theſe means, however, the diſeaſe will prove generally fatal.

Stone (Calculus).

DLXII. The ſtone is a diſeaſe particularly common to infancy, more ſo even than to adults. In the form of gravel, the ſymptoms are generally ſlight, and yield to ſome gentle emollient laxative, to dilution, or to ſome mild alkali.

DLXIII. If much pain ſhould attend this complaint, the warm bath or an opiate will be then proper, though they are ſeldom required. For more information on this diſeaſe, *vide* vol. II. p. 304.

Incontinence of Urine.

DLXIV. This is ſeldom, in infancy, a primary diſeaſe; but a conſequence of ſome other, as an affection of the bladder or ſpine. It is at times attended with violent gonorrhœa.

DLXV. One ſpecies of it, however, requires to be noticed, which takes place only in ſleep. This often continues for years during the growing ſtate, but is generally removed before the period of manhood.

DLXVI. The general treatment of this diſorder muſt be regulated by its cauſe.

DLXVII. In the acute ſpecies of it, bliſters to the ſacrum, and the uſe of tincture of cantharides in ſome ſoft emulſion, will often ſucceed; or aſtringents, as the catechu, bark, G. Kino, white vitriol, and ſome of the balſams.

DLXVIII. In the chronic ſpecies, abſtinence from fluid diet at night, daſhing the parrs with cold water, and the uſe of the cold bath, are in general the beſt temporary means.

Exceſſive Thirſt (Polydipſia).

DLXIX. Polydipſia, or exceſſive thirſt, has occurred in ſome few inſtances as an idiopathic diſeaſe of infancy.

DLXX. It is attended with a discharge of urine equal to the excess of fluid drank; and the urine is of the same pale watery appearance as when the fluid is received.

DLXXI. This complaint is marked by no peculiar symptom, except lassitude of the extremities. It ends, however, at times, in glandular affections, and atrophy.

DLXXII. During its continuance, the appetite is little impaired; but the withholding the fluids is attended with a nervous affection, rising at times to the height of convulsion.

DLXXIII. In adults the same disease has been known to succeed fevers, and to continue for life.

DLXXIV. Little satisfactory can be offered respecting the treatment. A morbid state, connected with weakness, in cases of adult polydipsia, evidently exists: whether, therefore, tonics may be employed, or opening the skin, or any other secretion that may be diminished, experience can only determine.

DLXXV. In infancy, the cure will perhaps be best trusted to time.

Inflamed Eyes (Ophthalmia).

DLXXVI. Children, at birth, are very subject to ophthalmia, which varies in its degree, obstinacy, and ex-

tent. From the appearance of the diſcharge, three ſpecies of it are noticed, viz. the blood-ſhot, watery, and purulent.

DLXXVII. The firſt is of little conſequence, as well as a ſlight inflammation appearing for the three or four firſt days after birth. The uſe of a gentle aſtringent waſh, and additional heat by a flannel cap, is ſufficient to remove it.

DLXXVIII. The ſecond, or the proper ophthalmia, is marked by general inflammation of the eye as in adults, a thin acrid diſcharge, and incapacity to bear the light.

DLXXIX. Its progreſs is various, and its duration uncertain. On getting well, it is liable ſuddenly to recur, without any evident cauſe. It is relieved by diarrhœa, and ſeems often to alternate with affections of the bowels. When attended with much obſtinacy and frequent recurrence, it ſeems connected with a ſcrofulous diſpoſition.

DLXXX. In its treatment, the common means of obviating inflammation are to be applied; and if not yielding to gentle aſtringent waſhes, with attention to the ſtate of the bowels, the application of a leech to the temple, or a bliſter on the back, will remove the height of the inflammation. When frequently recurring, and becoming ſomewhat of a chronic nature, an aſtringent or mercurial liniment, inſerted every night betwixt the angles of the eye, will cure it.

DLXXXI. It is more the recurrence of the diſeaſe than the preſent obſtinacy of the fit that renders this affection ſo troubleſome.

DLXXXII. The third, or purulent ſpecies, is a more ſerious diſeaſe, and is chiefly diſtinguiſhed by the extent of ſwelling and the diſcharge.

DLXXXIII. The period of its appearance is either immediately at birth, or a few days after. No apparent cauſe precedes it, and it proceeds with rapidity either to deſtroy the eye entirely, or to impair the ſight of it.

DLXXXIV. The treatment here depends on the moſt active means of obviating inflammation that the infantine ſtate admits, by a looſe belly, the application of a leech, and even ſcarification of conjunctiva in certain caſes, and the application of bliſters to the back, nape of the neck, or behind the ears, which are to be kept open; in the laſt ſituation, as a perpetual drain. The eyelids themſelves ſhould be prevented from adhering, by inſerting ſome greaſy matter occaſionally betwixt them; and at night Goulard's ointment ſhould be applied, with an aſtringent poultice above, or compreſſes dipped in an aſtringent ſolution.

DLXXXV. The extent of theſe firſt means muſt be regulated by circumſtances of the age and apparent ſtrength of conſtitution. When complete reli f is not received from them, they muſt give place in the progreſs of the diſorder, or as it paſſes into a chronic

ſtate, to ſtimulating applications, in the form of waſh and ointment.

DLXXXVI. The beſt of the former is the aqua camphorata, in the proportion ʒi. to ʒii. of fluid, uſed by injecting a few drops frequently into the eyes, or waſhing the lids with it. The ſame may be done with the tinct. opii, diluted in the ſame way.

DLXXXVII. The principal form of ointment here is the nitrated mercury, which may be lowered in ſtrength, and applied at night to the lids.

DLXXXVIII. The progreſs of this complaint occaſions various degrees of derangement in the ſtructure of the eye, from ſimple thickening of parts to a total obliteration.

DLXXXIX. In many inſtances, though not always, this affection is found to partake of a venereal nature, as deſcribed under that diſeaſe, p. 121; and, in theſe caſes, the inflammation would ſeem equally active as that which has been known to ſucceed retropulſed gonorrhœa. When, from its obſtinacy, this cauſe is ſuſpected, and no other venereal ſymptom attends to elucidate it, ſmall doſes of calomel may be exhibited; or the ſarſa in powder, given in pap, or Ward's white drop, or a ſolution of corroſive. If theſe remedies give relief, there can then be no doubt of its cauſe.

Film or Speck (Leucoma).

DXC. This diſeaſe has been treated at large elſewhere (vol. II. p. 189). In children, as in adults, it is moſt frequent in a ſcrofulous conſtitution; and ariſes as a conſequence of effuſion during the progreſs of inflammation.

DXCI. At this time of life it is more ready to yield to the application of remedies; and various ſtimulants, cautiouſly employed and perſevered in for ſome months, have at laſt effected a cure. The remedies are, the aqua cupri ammon. in a drop or two, injected twice or thrice a day; the corroſive ſolution, or the nitrated ointment. The great point in their uſe is to regulate the extent of the inflammation.

Cataract (Cataracta).

DXCII. Cataract and gutta ſerena are not infant diſeaſes; they may, however, occur, under peculiar circumſtances, as congenite diſorders; and their conſideration is therefore neceſſary here.

DXCIII. If at all curable by the power of medicine, which is only at this period of life admiſſible, the age of the patient, as being moſt favourable, ſanctions the attempt.

DXCIV. The cure of cataract here is chiefly to be attempted by applications to the part. The calomel

and cicuta, and the other narcotic internal remedies, are not ſo properly admiſſible.

DXCV. The applications for this purpoſe are ſuch as produce a proper action or ſtimulus on the veſſels of the part; and this either by ſimple mechanical bruſhing or exciting them, as by a ſmooth bruſh applied ſeveral times in the day, or by producing tranſient inflammation of the part for the ſame purpoſe. This is effected by diluted æther by itſelf, or combined with the corroſive ſolution or oil of amber, the ſteams of oil of turpentine, &c.

DXCVI. To be effectual, much nicety is requiſite in the extent of their application, and experience of the time during which it ought to be continued.

DXCVII. In the gutta ſerena, nothing is to be done: both electricity, which has removed it in adults, and alſo errhines, are equally inadmiſſible here. When the child is a few years advanced, ſuch means may then have a trial; and the ſooner it can be ſafely done, and while the ſyſtem retains the irritability of childhood, the more powerful the application of any remedy may be expected.

Stye.

DXCVIII. Stye is a ſmall inflamed tumour generally of the under lid of the eye, and towards the noſe ſide. It is the conſequence of cold, and tends to ſuppuration; but it is ſlow in its progreſs, and, where not complete, it is ſucceſſively repeated till the eye-lid or gland is deſtroyed. To terminate the diſeaſe, on a ſup-

puration taking place, the eye-lid may be gently touched with cauſtic, or a ligature, if admiſſible, paſſed towards its baſe, to ſeparate the diſeaſed part.

Deafneſs.

DXCIX. Deafneſs is a common complaint with children, and ariſes from three cauſes:

1. Cold.
2. Induration of the ſecretion of the ear, or its deficiency; and,
3. Diſeaſed ſtate of the auditory nerve.

DC. In the firſt caſe it is merely temporary, and continues only for a few days. But at times ſome degree of inflammation or thickening of the membrane attends, when confinement, warmth to the part, and the uſe of laxatives, are requiſite. In obſtinate caſes, however, it does not always yield to theſe ſimple means, and time is often the only reſource.

DCI. In the ſecond caſe, or where induration of the ſecretion prevails, its removal by a ſyringe muſt firſt take place; and, when removed, the parts muſt be defended by warmth and emollients, as a little warm oil of almonds, or cotton, inſerted into the ear; and, where theſe means are not ſufficient, more ſtimulant remedies muſt be employed.

DCII. Where deficient ſecretion prevails, which is known by the apparent dryneſs of the part, it is to be obviated by either an artificial ſupply, or ſtimulating the veſſels to produce a natural ſupply.

DCIII. The firſt depends on the ſoap liniment, dropped into the ear, or a little oil of almonds and æther.

DCIV. The ſecond, or ſtimulating the veſſels, is effected either by inſerting the juice of onion or a roaſted or raw clove of garlic, covering carefully the part from the external air by adheſive plaſter, or by the application of a bliſter behind the ear, or the uſe of electricity either through the meatus auditorius externus, or the Euſtachian tube.

DCV. In the third caſe, or a diſeaſed ſtate of the nerve, little is to be done; but the uſe of electricity, errhines, and ſea-bathing, may be tried.

Canker.

DCVI. Canker of the mouth conſiſts in ſmall ſores affecting the mouth, the inſide of the lips, or the gums. It occurs at three periods: either after birth, when it forms a ſpecies of aphthæ (as in p. 39); or during the time of teething, when it ariſes from the irritation of the protruding teeth; or at the age of ſix or ſeven years, when the firſt ſet of teeth are changing; and it is at this time the worſt ſpecies of the diſeaſe appears, the whole gum diſſolving into foul ſores. It is conſidered as prevailing in ſome countries more than in others. It is a trifling complaint, unleſs when combined with poverty and improper nutriment.

DCVII. The treatment of this complaint conſiſts in

the uſe of local aſtringents and attention to the primæ viæ, with the removal of the cauſe of irritation when in our power.

DCVIII. Thus, if ariſing from dentition, the eruption of the teeth will relieve it; and, if from decayed ſtumps, their extraction will be ſucceſsful, when the uſe of local aſtringents will complete the cure.

DCIX. When a putreſcent tendency ſeems to advance in ſpite of theſe means, the bark and mineral acids will be proper.

Gangrene of the Cheek.

DCX. This diſeaſe is preceded by the appearance of a black ſpot on the cheek or lip, uſhered in with ſome degree of rigor or cold fit. This ſpot ſpreads faſt, and the parts diſſolve into ulceration without apparent marks of inflammation.

DCXI. Its progreſs extends, and the whole ſide of the face, even the lip itſelf, comes to be eaten away, ſo that the jaw-bone and inſide of the mouth are laid bare. Towards its termination, the lower jaw falls down on the breaſt, the affected part of the face is diſſolved into a putrid maſs; and, the uſual ſymptoms of colliquation coming on in a putrid diarrhœa, the child is cut off.

DCXII. In the treatment of this complaint, which is by no means frequent, antiſeptics form the chief remedies for a cure.

DCXIII. The ſaline draughts in the act of effervescence, and the muriatic acid diluted in ſome aſtringent or antiſeptic infuſion, have been found moſt ſucceſsful, joined to a nouriſhing diet, and the uſe of wine.

DCXIV. The ſame applications muſt be made locally, in the form of lotion and liniment, to the ulcerated parts.

DCXV. During the progreſs of the cure, the occaſional uſe of laxatives, as indicated, will be proper.

Swelling of Breaſts.

DCXVI. We formerly noticed the affection of this kind peculiar to infants immediately after birth, p. 14. The ſame occurs in female children as the breaſts begin to enlarge and expand, when they become painful, hard, and ſwelled. The ſituation of the hardneſs is chiefly the bottom of the breaſt, which is ſometimes looſe, at other times fixed: from this part ſevere darting pains are felt. It is often confined to one breaſt; or, leaving one, it ſeizes the other. It occurs moſt frequently, alſo, in ſcrofulous conſtitutions.

DCXVII. The treatment here conſiſts chiefly in giving time till the proper uterine diſcharge take place, with which the turgeſcence here is connected. The ſymptoms, in the mean time, may be alleviated by the uſe of emollients; but no danger attends the complaint, and its continuance will be productive of no injury.

Abſceſs of the lower Belly (Tumor Hypochondrii).

DCXVIII. Abſceſs of the lower belly frequently occurs as a conſequence of injury in the infantine ſtate. It is marked by the appearance of tumor in the *regio pubis*, attended with much tenderneſs and pain on preſſure; and it is generally preceded by alvine complaints, particularly *cholera*.

DCXIX. The treatment here conſiſts entirely in obviating inflammation, and effecting a termination of the diſeaſe by reſolution. The antiphlogiſtic plan is therefore to be employed; and leeches, bliſters, and fomentations, applied to the part. The bowels are to be opened by emollient laxatives and glyſters, and pain and fever abated by opiates and diaphoretics. When a tendency to ſuppuration takes place, this proceſs is then to be haſtened by the common poultice; and the matter, being once formed, is to be diſcharged as quickly as poſſible, without waiting the external prominence and diſcoloration neceſſary in common abſceſſes.

DCXX. The after-treatment conſiſts in the continuance of the common poultice, the uſe of gentle laxatives, and a light nouriſhing diet.

Lumbar Abſceſs.

DCXXI. Lumbar abſceſs we already conſidered in vol. II. p. 136. Though moſt common to the adult,

it occaſionally appears in infancy, and is then the effect of injury, and connected for the moſt part with a ſcrofulous habit.

DCXXII. The firſt ſymptoms are, a ſlight lameneſs and ſhortening of one leg, with a ſenſe of weakneſs in the loins. This changes to acute pain and tenſion, ſtriking down the thighs, with conſiderable heat and general fever. A tumor, at laſt, forms externally, either at the groin or ſide of the anus, without any external inflammation or change of colour.

DCXXIII. The chief point here is, to procure reſolution in the early ſtage; but this is generally paſſed before the cauſe is ſuſpected. Reſolution, however, may be attempted by the common means of topical bleeding, with leeches or cupping; of bliſters or iſſues; of emetics, ſo as to give a contrary determination to the impulſe of the fluids; of the warm bath, of cauſtics, and electricity.

DCXXIV. Should hectic ſymptoms have already taken place, and this primary ſtage be paſſed, the diſcharge of the matter forms then the only reſource, as directed in vol. II. p. 138.

DCXXV. The matter being fully diſcharged in the manner and with the precautions there taken notice of, the recovery is to be truſted to a nouriſhing diet and tonics, particularly the bark, ſteel, and acids.

White Swelling.

DCXXVI. This is a ſcrofulous affection, peculiar to infancy, or at leaſt more frequent during this period. It is fully treated in vol. II. p. 156, and nothing additional occurs to be offered here.

Curved Spine and Palſy of the Lower Extremities.

DCXXVII. This affection is moſt commonly the conſequence of previous injury, as well in adults as infants, though often overlooked, at the time, till the morbid effects make their appearance.

DCXXVIII. The ſeat of this injury varies, being either the neck, back, or upper part of the loins. Its firſt ſymptoms in children are irregular twitchings in the muſcles of the thighs, ſucceeded by diſlike to motion. An incapacity to move next takes place; along with it the extremities loſe much of their ſenſibility. This incapacity prevails in various degrees; but the uſe of the extremities, in time, comes to be totally loſt, and a remarkable rigidity of the ankles is at the ſame time conſpicuous.

DCXXIX. To prevent the progreſs of this affection, or remedy it entirely when it has occurred, the chief means found ſucceſsful are the formation of a drain contiguous to or on each ſide of the ſeat of the injury, and

the giving the parts above the injury ſuch ſupport as may relieve the ſeat of the diſeaſe.

DCXXX. The firſt is done by the inſertion of a ſeton in each ſide, or in forming an iſſue with the knife rather than the cauſtic, as deſcribed in vol. II. p. 107 and 368. This drain is to be continued till ſome time after the diſappearance of the diſeaſe, and is then to be gradually allowed to dry up.

DCXXXI. The ſecond is anſwered by the uſe of different machines, invented by different artiſts for the purpoſe, and worn during the exiſtence of the affection.

DCXXXII. Theſe means are to be further aſſiſted by the uſe of friction, cold bathing, and tonics; but the inſertion of the iſſue is the firſt and leading principle of treatment.

Simple Debility of Lower Extremities.

DCXXXIII. This is a complaint not very frequent. It is the effect of preceding diſeaſe, but it ſhows no marks, during its continuance, of being complicated with any other affection. The only ſymptom is the *debility itſelf*, gradually increaſing, till, in four or five weeks from its commencement, the uſe of the limbs is entirely loſt.

DCXXXIV. The indications of cure are to reſtore

energy to the parts, and give them ſupport during the continuance of the diſeaſe.

DCXXXV. The firſt is done by bliſters and cauſtics to the ſacrum, and ſtimulant applications to the legs and thighs.

DCXXXVI. The ſecond conſiſts in the uſe of irons, to ſupport the legs, and enable the patient to walk. Theſe irons muſt be worn till after recovery takes place.

Debility, with Diſcoloration:

DCXXXVII. This differs from the former in being, apparently, a general affection of the ſyſtem. The children become weakly, and drag their legs after them; the head enlarges, the limbs become emaciated, and over the whole there appears a deep leaden blue colour.

DCXXXVIII. The operation of no external cauſe ſeems evident in producing this morbid ſtate.

DCXXXIX. The only means of relief pointed out by the ſymptoms are cordials and tonics, a generous diet, the bark, after opening the primæ viæ, tepid ſea-bathing, which is preferable to cold, and the application of friction and warm embrocations to the ſurface.

Curvature of Bones without Injury.

DCXL. This ſtate of the bones, the effect of rickets and other diſeaſes, requires a ſeparate conſideration in regard to its particular treatment. The treatment, in all caſes, is the giving ſupport by machines, till the curvature is taken off; and, till this curvature is taken off, no means of ſtrengthening the ſyſtem, ſo as to preſerve the bones in their improper ſhape, ſhould be uſed. Hence the impropriety of cold bathing till this end be effected.

Whitlow (Paronychia).

DCXLI. This affection we already conſidered in vol. II. p. 136. In a mild, or ſuperficial form, it is liable to repeat its attacks frequently in young perſons: its prevention, therefore, becomes an object of attention; and this is chiefly effected by frequent bathing of the part in an aſtringent anodyne ſolution, ſo ſoon as the firſt ſymptoms of attack are felt.

Boil, or Inflammatory Tumor (Furunculus).

DCXLII. Boils, in different parts, are a frequent affection towards the age of puberty. They are generally conſidered of a ſalutary tendency, and readily yield to

a common poultice and slight suppurant applications. A purge or two commonly succeeds their healing.

Chilblains.

DCXLIII. Chilblains we already considered in vol. II. p. 141; little, therefore, occurs to be added here. As they are entirely the effect of extreme cold, in their treatment a gradual change in the temperature of the part should only be permitted; hence the propriety of the first applications being ice, snow, solutions of salt, &c. Where the child is predisposed to this affection, oiled silk should be worn on the part, and this covered with a proper defence of leather, as the best preventative.

Burns.

DCXLIV. Infants are equally exposed to this accident as adults, and in them the tendency, from the excess of inflammation attending it, to gangrene, is greater. Nothing, however, can be added to the observations detailed in vol. II. p. 62, on this subject.

DCXLV. In slight cases, the use of astringent solutions will soon complete a cure; as, diluted brandy, or other spirit, ink, wine, saturnine lotions, &c.

DCXLVI. In ulcerated cases, the frequent renewal of ice, or a lotion of lime-water, the saturnine lotion and brandy, or a strong solution of soap, or a liniment of

olive oil, cold water, and ley, afterwards dreſſing with linſeed oil or Turner's cerate, will be equally effectual.

External Injuries of Bones.

DCXLVII. Such accidents are apt to occur both during the progreſs of birth, and alſo at any period of infancy. They are divided into two kinds, Luxations and Fractures.

DCXLVIII. The two ſituations of the firſt are the ſhoulder, and perhaps lower jaw.

DCXLIX. The ſhoulder, in children, ſo ſoon as it is known, is eaſily reduced; and little elſe is neceſſary, in the after treatment, than keeping the part from motion.

DCL. The lower jaw, when diſlocated, will give an awkward appearance, and alſo prevent the child receiving any nouriſhment till reduced. This is done in the manner deſcribed in vol. II. p. 356; and the after treatment requires to avoid exertion of the parts, as much as poſſible, for ſome time.

DCLI. Fractures, the other ſpecies of injury, are confined to the collar-bone, the arm, and the leg.

DCLII. The collar-bone is treated by drawing the ſhoulders back, by their confinement in that poſture by pinning them to the clothes, and by the application of

a piece of adhesive plaister, spread on leather, over the injured part.

DCLIII. Fracture of the arm is treated by a proper appositon of the ends of the bone to each other, as in the adult, and then retaining them in that situation. But in infancy this must be done without much tightness; and, for this purpose, three splints may be formed out of linen, repeatedly folded, perhaps five or six times, each half an inch wide, and one inch and a half long; and, being soaked in flour and white of egg, before their application, they will acquire sufficient firmness to secure the position of the part. They should be applied next the skin, and at first wet, so that, on drying, they will be accommodated to the shape of the member. Over them a flannel roller is to be applied, rather loosely, and the confinement of the arm trusted to pinning it close to the side, by strong pins, to the child's gown, which will best secure it. It need only be opened in ten or twelve days, and will be completely cured within the month.

DCLIV. Fracture of the leg is treated in the same manner as fracture of the arm.

Morbid Adhesion of Tongue.

DCLV. An undue extension of the frænum beyond its proper limits, pinning down the tongue, as it were, occasionally occurs, but not so frequently as the operation for its removal is called for.

DCLVI. The manner of performing the operation we already deſcribed in vol. II. p. 252. When much called for, it may be performed, though not ſtrictly neceſſary; at the ſame time, ſome caution is required in doing it, and even fatal accidents have ariſen in conſequence.

DCLVII. The accidents from this cauſe are ſwallowing of the tongue and hæmorrhage.

DCLVIII. Swallowing of the tongue is known by the uſual ſymptoms of ſuffocation. The child ſuffers much agitation: the attack is ſudden. The face turns black; and convulſion, unleſs ſleep is obtained, ſoon takes place, and proves fatal.

DCLIX. The treatment conſiſts in reſtoring the tongue to its place, and applying the child to the breaſt; and, when ſucking is over, attention is to be paid to the ſtate of the hæmorrhage; for it is the feeling the hæmorrhage that tempts the child, by ſucking, to ſwallow the tongue.

DCLX. The hæmorrhage, if conſiderable, is beſt ſtopped by an inſtrument in the ſhape of a fork, the prongs of which are ſo placed as to preſs on the ſublingual veins, and the other end of it againſt the lower jaw. This inſtrument is the invention of Mr. Petit. Such accidents ſeldom attend the operation when neceſſary at preſent.

Hiccough.

DCLXI. Hiccough forms a mild ſpecies of convulſion, to which infancy and childhood are much ſubjected.

DCLXII. It ariſes, in infancy, either from over diſtenſion or predominant acidity. In the firſt caſe the cauſe ſoon ceaſes; in the other it is generally connected with abdominal complaints, and yields to the uſe of abſorbents or external ſtimulants.

DCLXIII. In childhood, again, where more habitual and permanent, it will give way, as ariſing from ſimple irritability, to the uſe of the citric acid or vinegar, or any powerful ſuſpenſion of the feeling at the time, in the way of ſurpriſe or alarm; though the employment of this laſt means requires ſome caution.

Bleeding at the Noſe (Epiſtaxis).

DCLXIV. This complaint is generally ſymptomatic, till the age of puberty.

DCLXV. In the acute diſeaſes of children it is reckoned a favourable ſymptom, and generally gives relief.

DCLXVI. When accidentally occurring at other times, from over exertion on the part of the child, it

will prove equally ſalutary; but, wherever it is over profuſe, and the common medicines fail, it is to be treated as directed in vol. I. p. 51, or in vol. II. p. 215; though the latter will never, in children, be neceſſary.

Affections of Navel.

Hæmorrhage.

DCLXVII. Bleeding, or a rawneſs, is apt to ariſe on the ſeparation of the cord. It is the effect of a ſoft fungus, preventing the ſkin ſtretching, as uſual, over the mouths of the veſſels.

DCLXVIII. This hæmorrhage is often conſiderable, and frequently returns, ſo as to affect, in the end, the health of the child.

DCLXIX. The ſituation of the veſſels admits neither the uſe of cauſtic nor a ligature. It muſt be truſted, therefore, entirely to compreſſion.

DCLXX. This compreſſion is beſt made by a compreſs, or elſe doſſil, of lint, applied over the bleeding part, and ſecured by ſticking-plaſter and a bandage, or the ſticking-plaſter alone may be applied, as directed, to relieve the umbilical hernia.

DCLXXI. Hæmorrhage, too, is alſo apt to ariſe in conſequence of a weak or diſſolved ſtate of ſolid, after the cord is entirely healed. In this caſe it will yield to the uſe of ſtyptics and compreſſion.

Ulceration of Navel.

DCLXXII. Beſides hæmorrhage, the navel is ſubject to ulceration, from the improper ſeparation of the cord. This ſtate generally yields to the common remedies: a bit of ſinged cloth, the application of abſorbents, or a toaſted raiſin; and, when more ſevere, the uſe of a cabbage-leaf will effect the re-union.

DCLXXIII. But in many caſes, after it is entirely healed, this part is apt to excoriate, and paſs into ulceration. It is then attended with much thin diſcharge, which diſappears and returns irregularly, together with a raw look of the part, which is not many days in this ſtate, but continues to ſpread. This complaint is particularly connected with the ſtate of the primæ viæ, and an attention to it forms one of the leading indications in the cure. The part itſelf ſhould be touched with ſome cauſtic, as the argentum nitratum, or blue vitriol; or ſome abſorbent, as the chalk, or lapis calaminaris, and then covered with a common, or a ſaturnine poultice, or cabbage-leaves. It generally yields to this treatment in the courſe of five or ſix weeks.

DCLXXIV. But a peculiar ſpecies of ulceration, different from this, and more extenſive in its nature, remains to be deſcribed. This ulceration is the conſequence of preceding diſeaſe, and of courſe of a certain debility induced by it. It ariſes in the part, though formerly completely healed, and often at the diſtance

of five or ſix months, and ſpreads over a great part of the abdomen, tending, in its progreſs, to gangrene.

DCLXXV. The indications pointed out for its cure are, a powerful uſe of cordials and antiſeptics, as the bark, wine, and acids, in every form, both internal and external; but, in ſpite of theſe means, the diſeaſe is generally fatal, and but few caſes of recovery have hitherto occurred.

Imperfect Separation of the Cord.

DCLXXVI. By this is meant, where the cord ſepa-rates at the place of the ligature, and does not ſhrink ſufficiently near the umbilicus. Wherever this, which is very rare, occurs, as part of the cord may be ſaid ſtill to exiſt, and to convey a diſagreeable appearance, a new ligature is to be put on this remaining part, ſo as to make it ſhrink cloſe to the navel, as it ought.

Swelling of the Prepuce.

DCLXXVII. This complaint, when not the effect of inflammation or irritation, from ſtone, is properly an anaſarca, or dropſy of the part.

DCLXXVIII. It is preceded by a copious diſcharge of a ſoft ſoapy matter from the ſurface, which goes away with the ſwelling.

DCLXXIX. The treatment conſiſts in antiphlogiſtic fomentations, or poultices, or elſe ſlight ſcarifications of the part, to which means it generally yields.

Falling down of the Gut (Prolapſus Ani.)

DCLXXX. This complaint we examined in vol. II. p. 327, as occurring in the adult. In infancy it is the effect of debility or irritation; and, in order to its treatment, the cauſe muſt be removed to which it is owing.

DCLXXXI. It is then eaſily cured by aſtringent lotions, as compreſſes, dipt in wine, applied to the part, ſaturnine applications, made in the ſame manner, &c.; or, when the diſeaſe is of long ſtanding, injections may be made into the anus, as a decoction of oak-bark and alum, &c.

DCLXXXII. Where the prolapſus cannot be eaſily returned, on account of inflammation and ſwelling, a ſaturnine injection, with a proportion of laudanum, ſhould firſt be made, and then the reduction attempted, when the anodyne begins to take effect.

DCLXXXIII. Children with this complaint ſhould ſit hard, and their feet not touch the ground; and, when they walk abroad much, the part ſhould be ſupported by a ſuſpenſory.

Discharge from the Vagina.

DCLXXXIV. The nature of these discharges preceding puberty, is various, being either bloody, mucous, or purulent.

DCLXXXV. The first of these appears a few days after birth, and is of no consequence, nor requires any particular treatment.

DCLXXXVI. The second, or the mucous, shows itself at the age of five or six, in considerable quantity, often resembling the fluor albus, and is tinged with blood. It readily yields to the bark and the balsam capivi.

DCLXXXVII. The third, or the purulent, occurs in children of three or four years old. It also occurs, accidentally, later, and is then more fœtid in its appearance, and of a suspicious nature, to those unacquainted with the real disease; and, in forming a judgment at this period of life, much caution is necessary, not to be led away by rash and unjust suspicions. The disease readily yields to saturnine applications, in the form of lotion and ointment, and that in the course of eight or ten days. Wherever it is obstinate, it will yield to a short use of saline ☿, in the form of the corrosive solution, or Ward's white drops, or to the bark, and some of the balsams.

Contaminated Wounds.

DCLXXXVIII. This ſubject we formerly treated in vol. II. p. 65. Children are particularly expoſed, from the delicacy of their ſkins, to the bites of ſmall animals or inſects, and domeſtic applications, therefore, ſhould always be at hand to relieve them.

The common applications are mixtures of ſpirits, vinegar, and oil; or of camphorated ſpirit, vinegar, and laudanum; or what is preferable, if it can be got, is ice, applied for half an hour at a time to the part, and repeated every three or four hours.

For the bites of the viper and other large animals, the remedies of olive oil, eau de luce, and volatile alkali, are well known.

Congenite Diſeaſes.

DCLXXXIX. Congenite diſeaſes are ſuch as are coeval with or precede birth; and they conſiſt of either the deficiency, redundance, or imperfection, of parts.

DCXC. The firſt of theſe affections is a deranged circulation or imperfect change; by the fœtal ſtate, in this reſpect, partly continuing. This peculiarity conſiſts either in a ſtricture of ſome part of the pulmonary artery, or in the communication remaining open either between the ſeptum cordis, or that at the foramen ovale, or canalis arterioſus.

DCXCI. The ſymptoms of this affection are, a diſcolouration of the face and neck, with a dark blue or leaden colour of the lips. The period of their appearance is ſoon after birth; and they continue to increaſe, attended with difficult reſpiration on motion; neither are the ſymptoms relieved by any means employed but confinement to one poſture.

DCXCII. The cauſes of this diſeaſe depend on either mal-conformation, or deficient ſtrength in the powers of the ſyſtem to complete the natal circulation. The period when theſe changes ſhould take place is certainly from the firſt moment of birth at leaſt: if we judge from the morbid effects that the want of completion of the natal circulation ſhows, it muſt be in a very ſhort time.

DCXCIII. The prognoſis to be formed in ſuch affections is always unfavourable; though the exact period of it varies in different caſes.

DCXCIV. Nothing can be attempted in the way of treatment but to avoid whatever hurries the circulation; and every attempt, therefore, at ſudden motion, ſhould be ſtrictly guarded againſt.

Deficiency of Cranium.

DCXCV. Various inſtances of this affection appear, and form, therefore, various degrees of monſtroſity, which are incompatible with the continuance of life.

The moſt common ſpecies, however, is a defect of the cranial bones, at the fontanelle or future, termed by ſome authors hernia of the brain, from the protruſion formed of the brain at theſe parts.

DCXCVI. In this ſpecies the child continues to live. Its appearance is that of a round tumor, of various ſize, ſeldom exceeding a ſmall egg, without fluctuation or diſcoloured ſkin, and attended with ſome degree of pulſation correſpondent to the ſynchroniſm of the brain, of which it forms a part, with the pulſe. It diſappears or yields greatly to preſſure.

DCXCVII. It is chiefly by its want of fluctuation, by the effect of preſſure, and by its pulſation, that it is diſtinguiſhed from other tumors in this ſituation.

DCXCVIII. When once aſcertained, its cure is eaſily effected, which conſiſts in a gradual application of compreſſion. This is done by means of a piece of thin perforated lead attached to the child's cap; and, in making the compreſſion, attention muſt be paid not to excite pain or diſturb any of the functions. By this gradual procedure the tumor will diſappear or retire within the cranium, and the void ſpace be elongated by the progreſs of growth, ſo as to cloſe up the cavity from which it protruded.

DCXCIX. But tumors of an external ſpecies are more common in this ſituation than protruſions of the brain; and ariſe from two cauſes, compreſſion and malconformation.

Partial.

DCC. The firſt to be noticed is one conſpicuous at birth on the cranium, reſembling in ſize an egg, and of a round form, with the ſkin diſcoloured.

DCCI. It moſt frequently appears in the caſe of a firſt child. Its duration is various, and depends much on the proper application of remedies to reduce it.

DCCII. The treatment conſiſts in the uſe of aſtringents, compreſſion, or puncture, each of which is proper under various circumſtances.

DCCIII. The firſt are commonly applied immediately after birth, and conſiſt of fomentations of warm red wine or diluted brandy and vinegar; and, if theſe means prove ſucceſsful, they commonly ſubſide in a few days.

DCCIV. The ſecond, or compreſſion, is made with a piece of thin packing-box lead, folded up in linen, and kept conſtantly on the part.

DCCV. The third is only to be attempted where the former means fail, when the ſwelling daily increaſes from the increaſing accumulation of its contents; and when opened, and the bloody collection diſcharged, it will then yield to the firſt mode of treatment, or the uſe of aſtringents.

General.

DCCVI. Another ſpecies of this tumor occurs to be mentioned, more extenſive, leſs elevated, and without diſcolouration. It often occupies a third part of the ſcalp, ſucceeds the eaſieſt labours, and ariſes from ſome rupture of ſerous, not red veſſels. It generally ſubſides in the courſe of the month by the abſorption of its contents, and often in ſo rapid a manner that its diminution is daily viſible.

DCCVII. To aſſiſt this abſorption, when ſlow, the action of the veſſels may be excited by warm embrocations with vinegar, ſal ammoniac, or camphorated ſpirits. Compreſſion may alſo be employed, and promoting ſome diſcharge by the inteſtines.

DCCVIII. Of tumors from mal-conformation, the moſt frequent that occurs is what has been termed the ſpina biſida.

DCCIX. Such tumors poſſeſs a ſenſible fluctuation, contain a lymphatic matter, and are formed by a part of the medullary membrane.

DCCX. Their ſituation is always in ſome part of the ſpine; moſt commonly the lower part of the neck or upper part of the ſacrum.

DCCXI. Their appearance varies at birth, either according as they have been previouſly ruptured, or as they remain entire.

DCCXII. In the firſt caſe it forms an ulcer, marked by a prominent edge and depreſſed centre.

DCCXIII. In the ſecond caſe it exhibits a tumor of various ſize, from that of a pea to half a crown, more or leſs elevated, exceedingly thin and tranſparent above, and red and livid below. The ſurface feels ſoft, and its fluid retires on preſſure. The edges of the ſpine may alſo be found round its margin. In other caſes it forms a hard thick fleſhy ſubſtance, producing convulſions when much preſſure is applied to it.

DCCXIV. This affection depends on an imperfect conformation of the part, in general a deficiency of bony ſubſtance, and a collection of ſerum forms within the ſpinal medullary covering: ſometimes the ſpinal marrow at that part is wanting.

DCCXV. The effects of this conformation are various. In ſome caſes, children ſeem to have been little affected by its preſence; in other inſtances, various ſpecies of diſtortion are combined with it.

DCCXVI. Frequently it is entirely local. In other caſes, the fluid ſeems to have a connection with the brain; and, on preſſure of it, morbid ſymptoms of reaction appear in the head.

DCCXVII. Its fatality depends on its giving way either artificially or by accidental rupture. In the latter caſe a little gangrenous ſpot, or ſlough, forms at one point generally the thinneſt ſpot; which, ſpreading

wider and deeper, at laſt opens a way for the eſcape of the lymph.

DCCXVIII. On this taking place, the child generally dies in a few days, moſt commonly the third. If the parts, however, cloſe again, life is protracted ſomewhat longer.

DCCXIX. Hectic ſymptoms, alſo, often precede the rupture of the teguments; which increaſing rapidly on the rupture, the child becomes convulſed, and is ſuddenly cut off.

DCCXX. Life is ſeldom protracted under this diſeaſe above a few weeks. The rupture of the tumor is the critical period; yet ſome inſtances have been known of the child ſurviving above a twelvemonth; but it forms a very ſingular occurrence.

DCCXXI. From the general fatality of this diſeaſe, little can be attempted in the way of cure.

DCCXXII. Puncture and preſſure have been lately recommended; but to this many objections ariſe, and the facts of authors ſtrongly oppoſe it. But though puncture is always inadmiſſible, preſſure may be proper to a certain extent, with a view to prevent the rupture of the teguments, and thus to ſuſpend as far as poſſible the fatal event.

DCCXXIII. This preſſure will ſucceed beſt in theſe caſes where the tumor is low down on the ſacrum, where it does not ſeem to affect the head by any repul-

ſion of the fluid; and with this preſſure the uſe of aſtringent powders ſprinkled on the part, as the armenian bole, catechu, and alum, may be conjoined.

DCCXXIV. Wherever this preſſure ſeems to produce or increaſe the morbid ſymptoms, it ſhould be then laid aſide, and the treatment truſted then entirely to the uſe of the aſtringent powder and lotion, with a view to preſerve the teguments.

DCCXXV. Soft poultices have been recommended by ſome authors; but their effect can only be to haſten the event; neither does ſuch a degree of inflammation attend as to render them neceſſary in order to obviate this ſymptom.

Parenchymatous.

DCCXXVI. Spongy vaſcular tumors appear in the ſame ſituation at birth as the former, but without any affection of the bone, or receſſion of their fluid on preſſure. They have been termed by authors parenchymatous, a term not altogether proper.

DCCXXVII. The treatment here conſiſts either in the uſe of aſtringents and preſſure, as the Armenian bole, catechu, &c. ſprinkled on the part, and a piece of thin lead made to cover it, or in extirpation of the tumor altogether. In doing this, attention is required to the hæmorrhage, as a good deal of blood is frequently loſt.

Congenite Hernias.

DCCXXVIII. The ventral hernia of this period is a rare occurrence. The ſpecies of it termed hepartomphalus has been known in the living ſubject; and even the child has been known to ſurvive, and the liver been retracted into its ſituation in the courſe of a certain time. In the way of treatment, nothing can be done but leaving the proceſs to nature, by keeping the tumor eaſy, and counteracting any tendency to gangrene.

DCCXXIX. The navel hernia, or exomphalus, appears at times ſoon after birth; and, if immediately attended to, is eaſily cured by cold bathing. When neglected, it proves extremely troubleſome, eſpecially to the female ſex; and, for its treatment, a proper compreſſion of the part becomes neceſſary.

DCCXXX. This is done in various ways, ſuited to the period of life and the ſtage of the diſeaſe.

1. By a compreſs made of ſticking plaſter, with a bit of card interpoſed.

2. By a bit of bees' wax formed into the ſame ſhape, and applied in the ſame way.

3. By ſtraps of adheſive plaſter applied ſtar-ways acroſs the navel, ſo as to bring the parts fully together, and occaſionally renewed when giving way; or,

3. By Squirel's elaſtic bandage.

DCCXXXI. A prediſpoſition to this affection pre-

vails in thoſe children in whom the ſkin of the belly extends far upon the navel-ſtring.

DCCXXXII. Ruptures in the groin are more dangerous than the umbilical. They readily yield, however, to cold bathing, and ſeldom even require the aſſiſtance of a bandage. In ſome caſes, where the ſwelling gets large, and where the child is liable to fits of crying, a ſteel truſs may be neceſſary; but it is both difficult in its application, and it requires much attention, when applied, to mark if it continues properly placed, and does not injure the parts.

DCCXXXIII. When the child is more advanced, that is, after two years, ſhould the rupture ſtill continue, a truſs may be highly uſeful; and the cure of every rupture during infancy will be much expedited by the uſe of cold bathing.

DCCXXXIV. It is ſeldom in infancy that ſtrangulation takes place. Should it happen, its chief ſymptom will be the rejection of every thing by the ſtomach. In all caſes of vomiting, therefore, this cauſe ſhould be ſuſpected; and, if joined to a heat and ſwelling of the part, hernia is then the ſource of the evil, and its replacement muſt be attempted the ſame as in adults, directed in vol. II. and the bowels alſo opened by injections and laxatives, as there recommended.

Congenite Hydrocele.

DCCXXXV. Hydrocele, in infants, is generally coeval with birth. It is diſtinguiſhed by the tranſparency of its tumor, by its want of pain, by its not retiring on preſſure, nor its being enlarged by crying.

DCCXXXVI. The cauſe of this affection is either relaxation or injury of the part.

DCCXXXVII. Its treatment is very ſimple, and it readily yields to the uſe of any aſtringent lotion, as a compreſs of vinegar and water, or Mindererus' ſpirit, applied to the part, and occaſionally renewed. If any caſe more obſtinate than common occurs, the treatment recommended in adults, vol. II. p. 277, may be attempted.

DCCXXXVIII. In no caſe, when once removed, does the hydrocele of infancy return.

Congenite Imperfections of Parts.

Of Vagina.

DCCXXXIX. Imperforation of the vagina occurs, at times, in different degrees, and is divided into the external and internal. The former conſiſts ſimply in the expanſion of the hymen, which, at the age of puberty, when entire, requires an operation, as already deſcribed in p. 12.

DCCXL. The latter, or internal, conſiſts of a fleſhy maſs, filling up the cavity, for which there is, in general, no relief.

DCCXLI. Beſides imperforation, the aperture of the vagina is often, naturally, ſo ſmall, as to require an operation for its enlargement with the point of a lancet, dividing the line of its apparent extent, and keeping the parts open with a piece of fine lint, or ſponge, for a few days; or, inſtead of the lancet, the enlargement may be ſimply made with the fingers, and a little oozing of blood will follow the operation.

DCCXLII. It is, on all occaſions, proper to examine this circumſtance of the aperture of the vagina, in order that, when a defect takes place, it may be timely perceived, and relief afforded previous to the age of puberty.

Of Anus.

DCCXLIII. This defect we examined fully in vol. II. p. 328, and pointed out the means of relief, ſo that nothing new remains to be added here.

Of Penis.

DCCXLIV. Imperforation takes place here in various ways. The firſt is when the urethra is ſimply choaked with mucus, the waſhing out of which with

warm milk and water, and the insertion of a probe, will be sufficient to remove it.

DCCXLV. The second is when the urethra is wanting for the extent of the glands. Here the introduction of a small trecar, till it meets the natural opening, will be sufficient; and this perforation must be kept open till healed on a bougie.

DCCXLVI. The third is the opening of the urethra taking place on the under part of the glands, or at one side. These defects will all admit being remedied; and, in doing this, much must depend on the judgment of the operator.

DCCXLVII. The fourth is the penis drawn downwards, or to one side. Here the skin, where too tight or short, must be divided, and the edges kept at a distance till the sore is healed.

Of Lips.

DCCXLVIII. The hare-lip is the chief defect of this part, which we already considered fully in vol. II. p. 233.

Of Ears.

DCCXLIX. Defects here are generally incurable.

Of Eyes.

DCCL. The moſt common defect of viſion in young children is that of ſquinting. It is either coeval with birth, the effect of diſeaſe or convulſions, or elſe it is a deformity acquired by habit. In the two firſt caſes it is generally incurable.

DCCLI. In the laſt it admits a cure, by drawing the diſtorted eye in a right direction by the attraction of ſome bright colour, as a piece of bright-coloured ſilk on a bit of plaſter, placed towards the noſe or temple, always oppoſite, according to the ſituation of the diſtortion. Where both eyes are diſtorted, the uſe of goggles will anſwer the ſame purpoſe, or an opake covering with a ſmall aperture, which ſhould be worn ſo long as the bad habit remains.

Of Feet.

DCCLII. The feet are found at birth diſtorted in various directions, which have received different appellations.

DCCLIII. The method of treatment is the ſame in all caſes, viz. the application of a gradual preſſure in the oppoſite direction to that of the diſtortion, and this made by means of a machine conſtantly worn for the purpoſe.

Original Marks.

DCCLIV. Marks of various kinds alſo appear at birth, and diſfigure various parts of the external ſurface. So far as relief can be obtained by ſurgery, this ſubject is treated in vol. II. p. 146. It is clearly the effect of malconformation, and no way imputable to the imagination of the mother, as ſhe can have no influence or power in their production.

AN

INFANTILE PHARMACOPŒIA;

DIVIDED INTO

THREE PARTS,

viz.

MATERIA MEDICA, CLASSIFICATION,

AND

EXTEMPORANEOUS PRESCRIPTION.

PART I.

MATERIA MEDICA.

CONTAINING

THE ACTIVE REMEDIES

In Present Practice,

SIMPLE, COMPOUND, AND CHEMICAL,

WITH THEIR DOSES.

Simples.	*Parts used.*	*Doses.*	*Compound and Chemical.*	*Doses.*
Absinthium. Wormwood.	Tops.	℈ss. to ʒi.	Sal. Absinthii,	gr. v.
			Tinct. Absinthii,	ʒi. to ʒij.
Acetum Vini. Vinegar.			Sal Aceti.	
			Syrup. Aceti,	ʒi.
			Serum. Acet. ad libitum (ʒi. Acet. ad lb.i. Lact.)	
Acidum Vitriolicum. Vitriolic Acid.			Sp. Vitriol. tenuis,	gtt. x. to xx.
			vel Acid. Vitriol. dilut.	
			Sp. Vitriol. dulcis,	ʒi.
			vel Sp. Ætheris Vitriol.	
			Sp. Æther. Vitr.	gutt. xxx.
			vel Æther. Vitriolius.	
			Elix. Vitr. Acid.	gutt. xxx.
			vel Acid. Vitr. Aromat.	
			Elix. Vitr. dulc.	gutt. xxx.
			vel Sp. Æth. Vitr. Arom.	
Acid. Muriatic. Muriatic Acid.		gutt. xii. ter de die.		
Acorus. Sweet Flag.	Roots.			
Ærugo,			Ung. Ærugin.	
vel cuprum acido acetos. ros. Verdigreafe.			Aquâ Sappharina.	
			vel Aqua Ærug. ammon.	

Simple.	*Parts used.*	*Dose.*	*Compound and Chemical.*	*Dose.*
Allium. Garlic.	Root.	ʒss. dried.	Syrup Allii,	ʒ ij. to ʒss.
			Oxymel Allii,	ʒss. to ʒvi.
Aloe. Aloes.		gr. iij to ʒss.	Tinct. Sacra, *vel Vinum Alocticum.*	ʒij. to ʒss.
			Pil. Aloetic. *vel Pil. Aloes cum Myrr.*	
			Pil. Rufi,	℈i. to ʒss.
			Elix. Proprietatis,	gutt. xv. to ʒi.
			vel Elix. Aloes cum Myrr.	
			Elix. Proprietatis Vitriolici,	gutt. xv. to ʒi.
			vel Tinct. Aloes vitriol.	
Althea. Marshmallow.	Leaf and root.	℈i. to ʒss.	Decoct. Altheæ, (ʒi. to lb.i.)	lb.ij. indies
			Syrup. Altheæ,	ʒi. sæpe.
Alumen. Alum.		gr. iv. to ℈i.	Pulv. styptic. *vel Pulv. Alum. comp.*	gr. x. to ℈i.
			Serum Alumin.	ʒiv. to lb.ij.
			Coag. Aluminos.	
			Aqua styptic.	
Amygdalæ amaræ. Bitter Almonds.	Kernel.	gr. iv. to ℈ss.	Ol. Amygd. Amar.	
Amygdalæ dulces. Sweet Almonds.	Kernel.	ad libit.	Ol. Amygdal.	ʒi. to ʒij.
			Emulsio cois,	ad libit.
Amylum. Starch.			Mucilago Amyli,	ʒi. sæpe.
Anethum. Dill.	Seed.	℈i. to ʒi.	Ol. Anethi,	gutt. iij.
			Aq. Anethi,	ʒij. to iv.
Ammoniacum. G. Ammoniac.		℈i. to ʒi.	Lac Ammon.	ʒi. sæpe.
			Emplast. Ammon.	
Anguſtura	Bark.	℈i. to ʒi.	Decoct. Anguſt.	lb.ij. indies.
			Tinct. Anguſt.	ʒi.
Aniſum. Aniſe.	Seed.	gr. iv. to xv.	Ol. Aniſi,	gutt. iij.
			Aq. Aniſi,	ʒij. to iv.

Simple.	*Parts used.*	*Dose.*	*Compound and Chemical.*	*Dose.*
Antimonium, vel Antimon. Preparat.			Crocus Metallor. *vel Crocus Antimonii.*	gr. i. to vi.
Antimony.		gr. v. to ʒi.	Sulph. Aurat. Ant. *vel Sulphur. Antimonii præcipitatum.*	gr. iv. to xvi.
			Pulv. Antimon.	gr. iij. to vi.
			Calx. nitrata Ant. *vel* Pulv. Jacob.	gr. v. to xii. ter indie
			vel Antimon. ust. cum Nitro.	
			Tartarus Emeticus, *vel Antimon. tartarisat.*	gr. i. to vi.
			Vinum è Tartar Emetic. *vel Vin. Antimon. tartarisati.*	gutt. xv. to xxx.
			Vin. Antimonial. *vel Vin. è Tartar Antim.*	gtt. v. to ʒss.
Arabicum.			Trochisci albi,	ad libit.
Gum. Arabic.		ʒij.	Mucilago Gum. Arabic. ad lb. i.	ʒiv.
			Emulsio Arabic.	ad. libit.
Aristolochia tenuis. Birthwort.	Root.	℈i. to ʒij.		
Arnica. Leopard's bane.	Herb, flowers, and root.	℈i. to ʒi.	Decoct. Arnicæ, (ʒi. flor. lb.i.)	lb.i. indie
			Extract. Arnicæ,	ʒij. to iv. indies.
Arsenicum. Arsenic.		gr. $\frac{1}{8}$ to iij.	Solut. Arsenic. (gr. iv. to lb.i.)	a table spoonful.
Arum. Wake-robin.	Root.	℈ss. to ʒi.	Pulv. Ari comp	℈i. to ʒi

Simple.	*Parts used.*	*Dose.*	*Compound and Chemical.*	*Dose.*
Asa-fœtida.		gr. x. to ʒ ss.	Pil. Gum.	℈i.
			vel Pil. Asæ-fœtidæ com.	
			Tinct. fœtida,	gutt. x. to ʒ i.
			vel Tinct. Asæ-fœtidæ.	
Asarum.	Leaves.		Pulv. sternutat.	℈i. to ʒi.
			vel Pulv. Asari comp.	
Asarabacca.		℈ ss. to ʒ i.		
Aurant. Hispalense. Seville Orange,	Leaf, flower, juice of fruit, & outer rind.	ad. libit.	Aq. Cort. Aurant.	ʒij. to iv.
			Syrup. Cort. Aur.	ʒi.
			Conserv. Aurant.	ad. libit.
			Ol. Nerosi.	
Avena. Oats.	Seed.			
Balsamum Canadense. Canada Balsam.		gtt. xx. to xxx.		
Balsam. Copaibæ. Capivi Balsam.		gtt. xx. to xxx.		
Balsam. Gileadense. Balsam of Gilead.		gutt. x, to xl.		
Balsam. Peruvian. Balsam of Peru.		gutt. x. to xl.		
Balsam. Toletan. Balsam of Tolu.		gr. v. to ℈i.	Tinct. Toletan.	gutt. v. to xx.
			Syrup. Balsam.	ʒi. to ij.
			vel Syrupus Toletanus.	
Bardana. Burdock.	Root.	℈i. to ʒi.	Decoct. Bardanæ,	ʒij. sæpe (ʒij. to lb.i.)

Simple.	*Parts used.*	*Dose.*	*Compound and Chemical.*	*Dose.*
Barilla. (Impure Fossile Alkali.)			Soda purificata,	℈ss. to ℈i.
			Sal Rupellensis, *vel Soda tartarisata.*	ʒss. to ʒx.
			Sal Glauberi, *vel Soda vitriolata.*	ʒv. to ʒx.
Belladonna. Deadly Night-shade.	Leaves.	gr. i. to vi.	Infus. Belladon. (gr. i. to ʒi.)	ʒi.
			Extract. Bellad.	gr. i. to iv.
Benzoinum. Benjamin.		gr. iv. to xv.	Flor. Benzoin. *vel Acidum Benzoicum.*	gr. iv. to vi.
			Tinct. Benzoin.	gutt. x. to xl.
			Elix. Traumatt.	gutt. x. to xxx.
			vel Tinct. Benzo. comp.	
Bistorta. Bistort, or Snake-weed.	Root.	gr. x. to ʒi.		
Borax. Tincal.		gr. x. to ℈ ij.	Sal sedativ. Hombergii,	gr. iij. to ℈ i.
Calx viva. Quicklime.			Aqua Calcis,	ʒiv. to lb. i.
			Lin. Aq. Calcis.	
			Lixivium caustic.	gtt. xv. to xl.
			vel Aq. Lixiv. caustic.	
			Lix. caust. acer.	mit.
Camphora. Camphire,		gr. iij. to ʒss.	Sp. Vinos. Camph.	
			Emulsio Camphor.	ad. libit.
			Bals. Opodeldoch. *vel Linim. saponaceum.*	
			Linim. volat. *vel Oleum Ammoniatum.*	
			Aq. Vitr. camp.	
Canella alba. Wild Cinnamon.	Bark.	gr. iv. to vi.		
Cancer. Crab.			Oculi Cancrorum,	℈i. to ʒi.
			Chelæ Cancror.	℈i. to ʒi.

Simple.	*Parts used.*	*Dose.*	*Compound and Chemical.*	*Dose.*
Cantharis. Spanish Fly.		gr. ss. to ij.	Tinct. Canthar.	gutt. xx. to xxx.
			Emplast. Vesicator. *vel Emplast. Cantharid.*	
			Ung. epispal. fort. *vel. Ung. Pulv. Canthar.* mit. *vel Ung. Infus. Canthar.*	
Cardamine. Lady's Smock.		℈i. to ʒi.		
Cardamom minus. Lesser Cardamom.	Seed.	gr. iij. to ʒss.	Tinct. Cardom.	℈i. to ʒi.
Carduus benedict. Holy Thistle.	Leaves.	gr. i. to ʒi.		
Carvi. Carraway.	Seeds.		Ol. Carvi,	gutt. iij.
			Aq. Carvi,	ʒij. to iv.
			spirit. *vel Spiritus Carvi.*	ʒi.
Caryophylla arom. Clove.	Fruit.	gr. iij. to ʒss.	Ol. Cary.	gutt. iij.
Caryophylla rubra. Clove July flower.			Syr. Carophyl.	ʒi.
Cascarilla.	Bark.	gr. iv. to xij.	Infus. Cascaril. (ʒi. to lb. i.)	ʒiij.
Cassia fistularis. Cassia of the Cane.	Fruit.	ʒij. to ʒi.	Elect. Cassiæ,	ʒss. to ʒi.
Cassia lignea. Cassia Bark.	Bark & flowers.	℈i. to ij.	Aq. Cassiæ,	ʒij. to iv.
Castoreum. Castor.		gr. iv. to ℈i.	Tinct. Castor.	ʒi.
Catechu. Japan Earth.		℈i. to ʒss.	Tinct. Japonic. *vel Tinct. è Catechu.*	ʒi. to ij.
			Conf. Japonic. *vel Electuar. Japon.*	gr. v. to ℈i.
			Infus. Japonic. *vel Infus. Catechu.*	ʒij. to iv.

Simple.	*Parts used.*	*Dose.*	*Compound and Chemical.*	*Dose.*
Centaur. minus. Lesser Centaury.	Tops.	ʒß.		
Cera alba et flava. White and Yellow Wax.			Linim. simplex.	
			Ung. simplex.	
			Cerat. simplex.	
			Ung. Basilicon. *vel Ung. Resinosum.*	
			Emplast. cereum. *vel Emplast. simplex.*	
Cerussa. White Lead.			Sacchar. Saturni,	gr. ¼ to i.
			vel Cerussa acetata.	
			Ung. Saturni, *vel Ung. Cerus. acetat.*	
			Ung. album, *vel Ung. Cerussæ.*	
			Tinct. antiphthis.	gutt. xx. to xxx.
			vel Tinct. Cerus. acetat.	
Chamæmelum. Chamomile.	Single flower.	gr. v. to ʒi.	Extra Cham.	gr. vi. to ʒß.
			Decoct. cois,	ad libit.
			vel Decoct. Chamæmel.	
Cicuta. Hemlock.	Leaves, flower, & seed.	gr. vi. to cxxviii.	Extr. Cicut.	gr. v. to ʒi.
Cineres clavellati. Pot or Pearl ash.			Lixiv. purificat.	gr. iij. to v.
			Tart. regenerat.	ʒi.
			vel Lixivia acetata.	
			Tart. vitriolat.	ʒi. to v.
			vel Lixivia vitriolata.	
			Tart. solubile,	ʒß. to ʒi.
			Lixivia tartarisata.	
Cinnamomum. Cinnamon.	Bark.	gr. iij. to ʒß.	Species aromat.	gr. v. to xv.
			vel Pulv. Aromaticus.	
			Conf. Cardiac.	ʒi. to ij.
			vel Elect. Aromaticum.	
			Ol. Cinnam.	gutt. iij.
			Tinct. aromat.	ʒi. to ij.
			vel. Tinct. Cinn. comp.	
			Tinct. Cinnam.	ʒi. to ij.
			Aq. Cinn.	ʒij. to iv.
			spirit.	ʒi.
			vel Spiritus Cinnamomi.	

Simple.	*Parts used.*	*Dose.*	*Compound and Chemical.*	*Dose.*
Coccinella. Cochineal.		gr. xij. to ʒ ss.		
Cochlearia. Scurvy-Grass.	Leaves.	Ʒss. to ij.	Succ. ad scorbut. *vel Suc. Cochlear. comp.*	ʒij. to vi.
Colchicum. Meadow Saffron.	Root.	gr. ij. to ℈i.	Syrup. Colchici.	ʒi. to ij. ter indies.
Colocynthis. Bitter Apple.	Fruit.	gr. v. to ℈i.	Pil. Cocciæ, *vel Pil. Aloes, cum Coloc.*	℈i. to ij.
Columba. Columbo.	Root.	gr. x. to ℈i.	Tinct. Columbæ,	ʒss. to i.
Contrayerva. Counter-poison.	Root.	gr. vi. to ʒ ss.	Pulv. Con. com.	℈i. to ʒi.
Coriandrum. Coriander.	Seed.	℈i. to ʒi.		
Cornu Cervi. Hartshorn.		℈ss. to ʒi.	Sal C C. *vel Ammonia præparata.*	gr. iij. to xv.
			Sal C. C. volat.	gr. vi. to ℈i.
			Ol. C. C. *vel Aq. Am. ex Ossibus.*	gutt. x.
			Sp. C. C.	gutt. xv. to ʒi.
			Decoct. alb.	ʒiv. sæpe.
Cortex Peruvianus. Peruvian Bark.		℈i. to ʒi.	Extr. C. P.	gr. v. to ℈i.
			Decoct. C. P. *vel Decoct. Cinchonæ.*	lb. i. to ij. ind.
			Tinct. C. P. *vel Tinct. Cinchonæ.*	ʒi.
Creta alba. Chalk.		℈i. to ʒi.	Pulv. cretaceus,	℈i. to ʒi.
			Potio cretacea,	ʒiv. sæpe.
			Trochisci Cretæ,	ad libit.
Crocus. Saffron.	Chives.	gr. v. to ℈i.	Tinct. Croci,	gutt. x. to ʒi.

Simple.	*Parts used.*	*Dose.*	*Compound and Chemical.*	*Dose.*
Elaterium. Wild Cucumber.	Fruit.	gr. i. to iij.		
Cuprum vitriolatum. Blue Vltriol.		gr. ¼ to i.	Aq. styptic. *vel Aq. cup. vitr. comp.*	
Digitalis. Fox-glove.	Plant.	gr. i. to viij.		
Dolichos. Coweech.	Down of the pod.	gr. ij. to viij.		
Ferrum. Iron.			Limatura.	gr. iv. to viij.
			Mars saccharat.	gr. iv. to viij.
			Vitriol. calcinat.	gr. ff. to iij.
			vel Ferrum vitr. exsiccat.	
			Colcothar. vitriol.	gr. ff. to iij.
			vel ——— *ustum.*	
			Flores martiales,	gr. vi. to ℈ i.
			vel Ferrum ammoniatum.	
			Tinct. Martis,	gutt. x. to xx.
			Sal Chalybis, *vel* Vitriol. Martis,	gr. ij. to vi.
			vel Ferrum Vitriolatum.	
Filiæ Mas, Male Fern.	Root.	ʒi.		
Fœniculum dulce. Sweet Fennel.	Seeds.	℈i.		
Fuligo Ligni. Woodsoot.			Tinct. Fulgin.	gutt. x. to ʒi.
Fumaria. Fumitory.	Leaves.	ʒss. to j.	Infus. Fumar.	ʒij. to iv.
Galbanum. Galban.		gr. x. to xv.		

Simple.	*Parts used.*	*Dose.*	*Compound and Chemical.*	*Dose.*
Gallæ.				
Galls.		gr. ij. to vi.		
Gambogia.				
Gamboge.		gr. ij. to vi.		
Gentiana.	Root.		Extr. Gentian.	gr. v. to ʒʃ.
Gentian.			Infus. amar.	℥i. to ℥iv.
			vel Infus. Gentiani comp.	
			Vin. amar.	ʒi. to iij.
			vel Vin. Gentiani comp.	
			Elix. stomach.	ʒʃ.
			vel Tinct. amar. vel G. c.	
Geofræa.	Bark.		Infus. Geofreæ,	℥ʃ. to iv.
Cabbage-tree.		gr. ij. to x.	(℥i. to lb. ij.)	indies.
Glycyrrhiza.	Root.		Extr. Glyc.	ad libit.
Liquorice.		ʒʃ. to ʒi.	Decoct. Glyc.	idem.
			(℥i. to lb. ij.	
			Trochisci,	idem.
			vel Trochisci Glycyrrh.	
Granata Malus.	Flowers			
Pomegranate.	& rind	℈i. to ʒi.		
	of the			
	fruit.			
Gratiola.	Leaves.		Infus. Gratiol.	℥ʃ. to ij.
Hedge-Hyssop.		gr. x. to ℈i.	(ʒi. to ℥iv.)	
			Extr. Gratiol.	gr. iij. to ℈i.
Guaiacum.	Wood,		Gum Guiac.	℈ʃ. to ʒʃ.
Guiac.	bark, &	℥ʃ.	Elix. Guiac.	gutt. xx. to ʒʃ.
	resin.		*vel Tinct. Guaiaci.*	
			Elix. Guiac. volat.	ʒʃ.
			vel Tinct. g. ammoniata.	
Hordeum.	Seed.		Decoct. Hordei.	ad libit.
Barley.				

Simple.	*Parts used.*	*Dose.*	*Compound and Chemical.*	*Dose.*
Hydrargyrus. Mercury.		℥ff. to ij.	Merc. calcinat. *vel Hydrarg. calcinat.*	gr. i. to iij.
			Pil. Mercur. *vel Pil. Hydrargyri.*	gr. x. to xv.
			Pil. Æthiopicæ,	gr. x. to ℈i.
			Æthiops Mineral. *vel Hydr. sulphur. niger.*	℥ij.
			Pil. Plummeri, *vel Pil. Calomelan. comp.*	gr. x. to ℈i.
			Ung. cœruleum, *vel Ex. Hydrarg.*	
			Ung. Citrin. *vel Ung. Hydr. nitr.*	
			Ung. Calc. Hydrar. alb.	
			Emplast. cœrul. *vel Empl. Hydr.*	
			Mer. corros. subl. *vel Hydr muriat. corros.*	gr. ff. to ij.
			Mer. dulcis, *vel Calomelas.*	gr. i. to v.
			Turpeth. mineral. *vel Hydr. vitriolat. flav.*	gr. ff. to i.
			Mer. cinereus, *vel Hydr. præcip. ciner.*	gr. ij. to iv.
			Mer. præc. rubr. *vel Hydr. nitrat. rubr.*	gr. i. to iij.
			Mer. præc. alb. *vel Calx. Hydrarg. alb.*	gr. ii. to iij.
Hyosciamus. Henbane.	Herb, & seeds.		Extr. Hys.	gr. i. to ℈i.
Jalapium. Jalap.	Ro	gr. x. to ℈ij.	Pulv. Jalap. comp.	℈i. to ℥ff.
			Pil è Jalap.	gr. x. to xv.
			Resin. Jalap.	℈ff. to i.
			Tinct. Jalap.	℥ij. to vi.
Ipecacuhana. Ipecacuhan.	Root.	℈ff. to i.	Pulv. Dover. *vel Pulv. Ipecac. comp.*	gr. xv. to ℈i.
			Tinct. Ipecac. *vel vin. Ipecac.*	℥ff. to ij.

Simple.	*Parts used.*	*Dose.*	*Compound and Chemical.*	*Dose.*
Juniperus. Juniper.	Berry & top.	ʒij.	Ol. Juniperi,	gutt. iij.
		Bacc.	Aq. Junip. comp. *vel Sp. Juniper. comp.*	ʒi.
Kino. Gum Kino.		gr. viij. to xij.	Tinct. Kino,	ʒss. to i.
Lapis calaminaris. Calamy.			Cerat. Lap. cal.	
Lavendula. Lavender.	flower & tops.	℈i. to iij.	Ol. Lavand.	gutt. v.
			Sp. Lavand	gutt. xxx. to ℈i.
			Sp. Lav., Comp.	idem.
Lichen Islandicus. Iceland Liverwort.		℈i. to iij.	Mucilag. Lichen.	ad libit.
Lignum Campachense. Logwood.		gr. x. to ℈i.	Extr. L. C.	gr. v. to xv.
			Decoct. L. C. (ʒiij. to lb.ij.)	ʒiv. sæpe.
Lilium album. White Lilly.	Root.	℈i. to ʒi.	Mucilag. Rad.	ad libit.
Limon. Lemon.	Juice, outer rind, &c.		Succ. Limon.	ʒi. to ij.
			Syrup. Limon.	ʒi.
			Aq. Limon.	ʒij. to iv.
Linum. Lintseed.			Infus. Lin. (ʒss. to lb.ss.)	ad libit.
			Ol. Lini.	ʒi.
Lithargyrus. Litharge.			Acet. Lithargyr.	gtt. x. to ʒi.
			Aq. Veg. mineral.	
Lobelia. Blue Cardinal Flower.	Root.		Decoct. Rad. sicc. (ʒiv. to lb. v.	lb. ii. in dies.
Manna. Manna.		ʒij.	Serum Mannæ,	ad libit.
Magnesia alba. Magnesia.		℈i. to ʒij.		
Mastiche. Mastic.		gr. ij to xij.		

Simple.	*Parts used.*	*Dose.*	*Compound and Chemical.*	*Dose.*
Melampodium. Black Hellebore.	Root.	gr. vi. to ʒ ss.	Extr. Melam.	gr. v. to ℈ ss.
			Tinct. Melamp.	gr. v. to ℈ ss.
Mentha Pipirit. Peppermint.	Leaves.		Ol. Menthæ,	gutt. iij.
			Aq. Menth.	ʒij. to iv.
			spirit.	ʒi.
			vel Sp. Menthæ.	
Mentha Sativa. Spearmint.			Infus. callid. *vel* Thea.	ad libit.
			(ʒi. to lb. i.)	
Menyanthes. Marsh Trefoil.		℈ i. to ij.		
Mezereon.		gr. ss. to iij.	Decoct. Mez.	lb. ij. in dies
			(ʒi. to lb. iiij.)	
Millepedæ. Slaters, or Woodlice,		gr. iij. to v.	Vin. Millep.	ʒi. to iij.
Moschus. Musk.		gr. iij. to xij.	Tinct. Moschi,	gtt. xxx. to ʒ i.
Myrrha. Myrrh.		gr. iij. to xij.	Tinct. Myrrhæ,	gtt. xv. to ʒi.
Nicotiana. Tobacco.			Infus. Nicot.	gtt. lx. to cxx.
			Vin. Nicot.	idem.
Nitrum. Nitre.		gr. vi. to ℈ i.	Acid. nitros. tenue	gtt. aliq.
			Trochisci Nitri,	ad libit.
			Sp. Nitri dulcis,	ʒ ss. to i.
			vel Sp. Ætheris nitrosi.	
			Caustic. Lunar.	
			vel Argentum nitratum.	
			Sal Polychrest.	ʒij. to ʒ ss.
			vel Lixivia Vitriol. sulph.	
Nux Moschata, vel Myristica. Nutmeg.		gtt. xv. to ʒ i.	Aq. Nuc. spirit.	ʒ i. to ʒi.
			vel Sp. Myristicæ.	
Olibanum. Frankincense.		gr. v. to ℈ i.		

Simple.	*Parts used.*	*Dose.*	*Compound and Chemical.*	*Dose.*
Olea expressa. Expressed oils.		℥i.		
Opium.		gr. i. to cxx.	Pil. pacific.	gr. x. to ℈i.
			vel Pil. Opii.	
			L. Laudanum.	gtt. xxx. to ℥i.
			vel Tinct. Opii.	
			Elect. Thebaic.	℥ij. to ℥ss.
			vel Electuar. Opiatum.	
			Elix. Paregoric.	℥i.
			vel Tinct. Opii ammon.	
			Trochisci Bechichi,	3 *vel* 4 in dies.
			vel Troch. Glycyr. cum Op.	
			Balsam. Anodyn.	
			vel Linim. opiatum.	
Papaver. Poppy.	Head.		Syrup. Diacodion.	℥i. to ℥i.
			vel Syrup. Papav. albi.	
Petreolum. Rock Oil.			Aq. Petreoli.	℥iv. to lb. ss.
			(lb. ij. to *cong.* ij.)	
Pimenta. Jamaica Pepper.	Berry. gr. ij. to iv.		Aq. Piment.	℥i. to iv.
			——— spirit.	℥i. to ℥i.
			vel Sp. Pimentæ.	
Pulsatilla Nigricans. Meadow Anemone.	Herb & flower.		Extr. Pulsat.	gr. v. to ℈i.
			Aq. Pulsat.	℥ss.
Pyrethrum. Pellitory.	Root. gr. iv. to ℈i.			
Quassia. Quassy.	Wood, bark, & root. gr. x. to ℈i.			
Quercus. Oak.	Bark. ℈ij. to ℥i.			
Quercus Marina. Sea Wreck.			Æthiops Vegetabilis,	℥i. to ℥ij.
Raphan. Rustic. Horse-Radish.	Root. ℥i. to ij.		Aq. Raphan.	℥ij. to iv.

Simple.	*Parts used.*	*Dose.*	*Compound and Chemical.*	*Dose.*
Radix Indica Lopez. Indian, or Lopez's Root.		ʒß.		
Rhamnus Cathart. Buck Thorn.	Root.	ʒi. to iij.	Syrup. Rhamn.	ʒi. to iij.
Rheum. Rhubarb.	Root.	ʒi. to ʒi.	Pil. stomach. *vel Pil. Rhei comp.*	ʒß.
			Infus. Rhei,	ʒij. to iv.
			Tinct. Rhei,	ʒij. to ʒß.
			Vin. Rhei dulc.	℥i.
			——— amar.	℥i.
			Elix. Saccr. *vel Tinct. Rh. cum Aloe.*	ʒi.
Rhododendron.	Herb.	gr. ij. to iv.	Decoct. Rhodod. (ʒij. to ℥x.)	ʒij. to v.
Ricini Ol. Castor Oil.	Seed.	ʒij. to ʒß.		
Rosæ pallidæ. Pale Roses.	Petal.		Aq. Rosar.	ʒij. to iv.
			Syrup. Rosar.	ʒi.
Rosæ rubræ. Red Roses.	Petal.		Conserv. Rosar.	ʒß.
			Tinct. Rosar. *vel Infus. Rosar.*	ʒi. sæpe.
			Syrup. Rosar.	ʒi.
Rosmarinus. Rosemary.	Top & flower.		Ol. Rosmar.	gutt. iij.
			Aq. Sp. Rosmar. *vel Sp. Rosmarin.*	ʒi. to ʒi.
			Aq. Regin. Hung.	idem.
			Acet. Aromat.	ʒi. to ij.
Rubia. Madder.	Root.	ʒß. to i.		
Ruta. Rue.	Herb.	ʒß. to ʒi.	Ol. Rutæ,	gutt. iij.
			Infus. Rutæ, (℥i. to lb.i.)	ʒij.
Sabina. Savine.	Leaf.	ʒß. to i.	Extr. Sab.	gr. v. to ʒß.
			Decoct. Sabin. (℥i. to lb. iij.)	ʒij. to iv.

Simple.	*Parts used.*	*Dose.*	*Compound and Chemical.*	*Dose.*
Sagapenum. Sagapen.		gr. v. to ℈i.		
Sal Ammoniacum. Ammoniac Salt.		ʒss. to i.	Sal Ammon. vol.	gr. v. to ℈i.
			vel Ammon. præparata.	
			Sp. Sal Am.	gutt. xv. to ʒi.
			vel Aq. Ammoniæ.	
			Sp. Sal Am. cum Calce.	
			vel Aq. Am. caustic.	
			Sp. Sal. Am. vin.	gtt. x. to ʒi.
			vel Sp. Ammoniæ.	
			Sp. Salin. arom.	gutt. x. to xl.
			vel Sp. Am. aromat.	
			Sp. volat. fœtid.	gtt. x. to xxx.
			vel Sp. Am. fœtid.	
			Sp. Mindereri,	ʒij. to ℥i.
			vel Aq. Am. acetat.	
Sal marin. Hisp. Sea Salt.		ʒi.	Sp. Sal marin. *vel Soda muriata.*	gutt. v.
Salvia. Sage.	Leaf.	℈i. to ʒi.	Infus. Salviæ, (℥ij to lb.i.)	ad libit.
Sambucus. Elder.	Inner bark, flower, & berry.		Decoct. Samb. (flor. mp. i. to ℥vij.)	ʒss. to i.
			Rob. Samb.	ʒi. to ℥i.
Sal Cathart. amar. *vel Magnesia vitriolata.* Bitter Cathartic Salt.		ʒij. to ʒss.		
Sapo alb. Hispan. Castile Soap.		℈i. to ʒij.	Pil. Sapo. Linim. saponac.	gr. v. to ℈i.
Sarsaparilla.	Root.	ʒi. to ʒss.	Decoct. Sarsæ, (℥i. to lb.i)	lb.ij. in dies.
Sassafras.	Wood, root, & bark.	ʒij.	Decoct. Lignor.	idem.

Simple.	*Parts used.*	*Dose.*	*Compound and Chemical.*	*Dose.*
Scammonium. Scammony.		gr. iij. to xij.	Pulv. Scam. c.	℈i. to ij.
Scilla. Squill.	Root.	gr. ij. to vi.	Pulv. Siccat.	gr. i. to iij.
			Pil. scillit.	gr. xv.
			Acet. scillit.	ʒi. to ʒss.
			Oxymel scillit.	ʒss. to ʒiij.
			Syrup. scillit.	ʒi. to ʒij.
			Vin. scillit. (rad. ʒss. ad vin. lb.ij.) ʒss. pro dose.	
Scordium. Water Germander.		gr. v. to ℈i.		
Seneka. Senega.	Root.	℈i. to iij.	Decoct. Senekæ, (ʒi. to lb.i.)	ʒij. to iv.
Senna.	Leaf.	ʒi. to ʒss.	Elect. Lenitiv. *vel Electuar. Sennæ.*	ʒij. to ʒss.
			Elix. salut. *vel Tinct. Sennæ comp.*	ʒij.
Serpentaria. Snake root.	Root.	ʒi. to ℈ss.	Decoct. Serpent. (rad. ʒij. to ʒvi.)	ʒi. sæpe.
			Tinct. Serpent.	ʒss. to ij.
Simarouba.	Bark. gr. x. to ℈i.		Decoct. Simar. ʒij. to lb.i)	ʒij. sæpe.
Spermaceti, vel Sevum Ceti.		℈i. to ʒi.		
Sinapi album. White Mustard.	Seeds.	ʒi.		
Spigelia. Indian Pink.	Root.	gr. x. to ℈i.		
Spongia. Sponge.			Spongia usta,	℈i. to ʒi.
Stannum. Tin.	Filings and powder.	ʒss. to i.		
Styax. Storax.		gr. v. to ℈i.		

Simple.	*Parts used.*	*Dose.*	*Compound and Chemical.*	*Dose.*
Succinum.			Ol. Succini,	gutt. x. to xxv.
Amber.		gr. viij. to ʒss.	Sal Succini,	gr. iv. to ℈i.
Sulphuris Flores.			Ung. antipsoric.	
Flowers of Sulphur.		ʒij. to ʒss.	*vel Ung. Sulphuris.*	
			Balsam. sulph. gtt. xv. to xxx.	
Tamarindus.	Fruit.		Infus. cum Sennâ,	ʒij to iv.
Tamarind.		ʒij.		
Tartari Chrystalli.			Sal Tartar.	gr. iij. to xv.
Chrystals of Tartar.		ʒv. to vi.	Lixiv. Tartar.	gutt. xv. to ʒi.
Terebinthina Veneta.			Ol. Terebinth.	gutt. v.
Venice Turpentine.		℈ss. to ʒss.	Sp. Terebinth.	gutt. x. to xx.
Tormentilla.	Root.		Infus. Rad.	ʒij. sæpe.
Tormentill.		℈ss. to ʒi.	(ʒi. to lb i.)	
Tussilago	Herb		Infus. Tussilag.	ad libit.
Coltsfoot.	&		(Herb. mp. i. to lb.i.)	
	flowers.		Syrup. Tussilag.	ʒi.
Tutia.				
Tutty.				
Valeriana sylvest.	Root.		Infus. Valerian.	ad libit.
Wild Valerian.		℈ss. to ʒss.	(ʒi. to lb.i.)	
			Tinct. Val. volat.	gtt. xx. to xl.
			vel Tinct. Valer. Am.	
Veratrum	Root.		Tinct. Veratri,	ʒss.
White Hellebore.		gr. v. to ʒss.	Decoct. Verat.	ʒi. sæpe.
			(ʒi. ad lb.i.)	
Viola.	Fresh		Infus. Violar.	ʒij. to viij.
Violet.	flower.		ʒi. to lb.i.)	
			Syrup. Violar.	ʒi.
Vipera.			Vin. Viperin.	ʒij. to ʒi.
Viper.		℈ss. to ʒi.		
Ulmus.	Inner		Decoct. Ulmi,	lb. ij. in dies.
Elm.	bark.		(ʒij. to lb.ij.)	
Uva Ursi.	Leaf.		Infus. Uvæ Ursi,	ʒi. to viij.
Bear's Wortle-berry.		℈i. to ʒiij.	(ʒij. to lb.i.)	

Simple.	*Parts used.*	*Dose.*	*Compound and Chemical.*	*Dose.*
Zincum.			Ung. Zinci,	
Zinc.			Flor. Zinci,	gr. ij. to ℈i.ss.
			vel Zincum ustum.	
			Aq. Vitriolica.	
			vel. Aq. Zinci vitriolat.	
			Vitriolum album.	℈i.ss. to ij.
			vel Zinc. vitriolat.	
Zinziber.	Root.		Infus. Zinziber.	℥ij. to iv.
Ginger.		gr. v. to x.	℥ij. to lb.i.	
			Syrup. Zinziber.	℥i.

TABLE

Shewing the Quantity *of the* Principal *or* Active INGREDIENT *in certain* COMPOUND MEDICINES.

OPIUM.

	now	*contains*
L. Laud.	(*Tinct. Opii.*)	in each ounce ℈ij. of Opium.
Paregor. Elix.	(*Tinct. Opii am.*)	ditto gr. viii. of Opium.
Dover's Powd.	(*Pulv. Ipec. comp.*)	Dram gr. vi. of Opium.
Thebaic Elect.	(*Elect. Opiat.*)	ditto gr. i. of Opium.
Japon. Elect.	(*Elect. Catech.*)	Ounce gr. ij. ff. of Opium.
Pacific Pills.	(*Pil. Opii.*)	Dram gr. vi. of Opium.
Opium Troch.	(*Troch. Glyc. cum Op.*)	ditto gr. i. of Opium.
Anod. Balsam.	(*Linim. Opiat.*)	Ounce ℈j. of Opium.

MERCURY.

	now	*contains*
Pil. Merc.	(*Pil. Hydrar.*)	in each Dram gr. iv. of ☿.
Pil. Plum.	(*Pil. Calom. comp.*)	ditto gr. xxii. of ☿.
Ung. Merc.	(*Ung. Hydrar.*)	ditto gr. xij. of ☿.
Ung. nitrat.	(*Ung. Citrin.*)	ditto gr. iv. of ☿, and gr. vii. of acid.
Ung. nitrat. mit.	(*Ung. citr. mit.*)	ditto gr. ii. of ☿, and gr. iv. of acid.
Emplast. Merc.	(*Emp. Hydrar.*)	ditto gr. xvi. of ☿.

ANTIMONY.

	now	*contains*
Tartar emetic Wine.	(*Vin. Antimon. Tart.*)	in each Ounce gr. ij. of Tartar.

SCAMMONY.

	contains
Comp. Powder of Scammony. (*Pulv. Scam. comp.*)	in each gr. vij. gr. iv. of Scam.

ALOES.

	now	*contains*
Colocynth Pills.	(*Pil. Aloes cum Colocynth.*)	in each Dram gr. xvi. of Aloes.

JALAP.

	now	*contains*
Comp. Powder of Jalap.	(*Pulv. Jalap comp.*)	in each Dram ℈i. of Jalap.

PART II.

CLASSIFICATION

OF THE

PRINCIPAL* ARTICLES OF THE MATERIA MEDICA,

(ENUMERATED IN PART FIRST,)

ACCORDING TO THEIR MEDICAL QUALITIES.

CLASS I.

EMETICS,	EMETICA.
1. MILD, *as,*	1. MITIA, ut,
Bitters in an increaſed doſe	*Amara fortia*
Chamomile, Carduus, &c.	
Ipecacuhan	*Ipecacuhan*
Wine of ditto	*Vin. ejuſdem*
Antimonial Wine	*Vinum antimoniale*
White Vitriol	*Vitriolum album*
Oxymel of Squills	*Oxymel Scillarum*
Syrup of ditto	*Syrup. Scillarum.*
2. DRASTIC, *as,*	2. DRASTICA, ut,
Tartar emetic	*Tartarus emeticus*
Wine of ditto	*Vin. è Tart. emetic.*
Turpeth Mineral	*Turpethum minerale*
Blue Vitriol	*Vitriolum cœruleum, vel cuprum vitriol.*

* Some of the leſſer claſſes are omitted, as *Errhines, Sialagogues,* being now diſuſed in practice.

CLASS II.

PECTORALS, PECTORALIA.

1. ATTENUANTS, *as,*	1. ATTENUANTIA, ut,
Garlic (freſh and dried)	*Allium*
Syrup of ditto	*Syrup. Allii*
Squills (freſh and dried)	*Scilla*
Vinegar of ditto	*Acetum ſcilliticum*
Oxymel of ditto	*Oxymel ſcilliticum*
Syrup of ditto	*Syrup. ſcilliticus*
Pills of ditto	*Pill. ſcillit.*
Ground Ivy Infuſion	*Hederæ Terreſtris Infuſ.*
Decoction of Liquorice	*Infuſ. Glycyrrhizæ*
Extract of Liquorice	*Extr. ejuſdem*
Benjamin	*Benzoïnum*
Flowers of ditto	*Flores Benzoïni*
Tincture of ditto	*Tinct. ejuſdem*
Gum Ammoniac	*Ammoniacum Gum.*
Flowers of Sulphur	*Flores Sulphuris*
Balſam of ditto	*Balſam. ejuſdem.*
2. INCRASSANTS, *as,*	2. INCRASSANTIA, ut,
Coltsfoot	*Tuſſilago*
Tea and Syrup of ditto	*Infuſ. et Syrup. ejuſdem.*
Marſhmallow	*Althæa*
Decoction of ditto	*Decoct. ejuſdem*
Syrup of ditto	*Syrup. ejuſdem*
Gum Arabic	*G. Arabicum*
Mucilage of ditto	*Mucilago ejuſdem*
Emulſion of ditto	*Emulſio ejuſdem*
Arabic Troches	*Trochiſci Arabici*
Lintſeed Tea	*Infuſ. Sem. Lini*
Spermaceti	*Spermaceti, vel Sevum Ceti*
Expreſt Oils, as,	*Olea expreſſa, ut,*
Oil of Sweet Almonds	*Ol. Amygdal. dulcium*
Opium	*Opium.*

CLASS III.

CATHARTICS. CATHARTICA.

I. LAXATIVES. I. LAXANTIA.

Acid Fruits, *as,*	*Fructus acidi,* ut,
Tamarinds	*Tamarandi*
Caſſia of the Cane	*Caſſia Fiſtularis*
Electuary of ditto	*Elect. Diacaſſia*
Manna	*Manna*
Manna Whey	*Serum Mannæ* -
Syrup of Pale Roſes	*Syrup. Roſar. Damaſcenſ.*
Ditto of Violets	*Syrup Violarum*
Soap	*Sapo*
Soap Pills	*Pil. Saponac.*
Cream of Tartar	*Crem. Tartari*
Magneſia	*Magneſia alba*
Caſtor Oil	*Ol. Ricini*
Flowers of Sulphur	*Flores Sulphuris.*

2. PURGATIVES, *as,* 2. PURGANTIA, ut,

Aloes	*Aloe*
Aloetic Pills	*Pil. aloetic, vel ex Aloe*
Rúfus' Pills	*Pil. Rufi, vel Aloes cum Myrrhâ*
Aloetic Wine	*Vin. aloetic*
Rhubarb	*Rhæum*
Stomachic Pills	*Pil. ſtomach.*
Tincture of Rhubarb	*Tinct. Rhæi*
Infuſion of ditto	*Infuſio ejuſdem*
Wine of ditto	*Vin. ejuſdem*
Bitter Tincture of ditto	*Tinct. Rhæi amar. vel T. Rhubarb. C.*
Sweet Tincture of ditto	*Tinct. Rhæi dulcis*
Sacred Elixir	*Elixir ſacrum, vel ex Aloe et Rhæo*
Senna	*Senna*
Infuſion of Tamarinds with Senna	*Infuſ. Tamarind. cum Sennâ*
Lenitive Electuary	*Electuar lenitiv. vel è Sennâ*

Elixir of Health	*Elix. ſalut. vel Tinct. Sennæ C.*
Jalap	*Jalapium*
Extract of ditto	*Extr. ejuſdem*
Compound Powder of ditto	*Pulv. ejuſdem comp.*
Jalap Pills	*Pil. è Jalap.*
Tincture of Jalap	*Tinct. Jalap.*
Syrup of Buckthorn	*Syrup. de Rhamno*
Bitter Cathartic Salt	*Sal Cathart. amar.*
Glauber's Salt	*Sal Glauberi, vel Soda Vitriol.*
Solubile Tartar	*Tartar ſolubile, vel Kali Tartariſat.*
Vitriolated Tartar	*Tartar vitriolatum, vel Kali Vitriolat.*
Polychreſt Salt	*Sal Polychreſt. idem*
Rochelle Salt	*Sal Rochelle, vel Soda Tartariſ.*
3. DRASTICS, *as,*	3. DRASTICA, ut,
Colycinth	*Colycinthis*
Pills of ditto	*Pil. è Colocynth.*
Scammony	*Scammonium*
Compound Powder of ditto	*Pulv. Scamm. comp.*
Elaterium	*Elaterium*
Gamboge	*Gambogia*
Foxglove	*Digitalis*
Decoction of ditto	*Decoct. ejuſdem*
Black Hellebore	*Melampodium*
Tincture of ditto	*Tinct. ejuſdem*
White Hellebore	*Veratrum*
Tincture of ditto	*Tinct. ejuſdem*
Hedge Hyſſop	*Gratiola.*

CLASS IV.

ABSORBENTS.	ABSORBENTIA.
Crabs' Eyes	*Oculi Cancrorum*
Crabs' Claws	*Chelæ eorundem*
Prepared Chalk	*Creta præparata*
Coral	*Corallium*
Pearls	*Margaritæ.*

Magnesia	*Magnesia*
Calcined Hartshorn	*Cornu Cervi calcinat.*
Quick-lime	*Calx viva*
All Alkalis in a diluted state	*Alkalina mitia.*

CLASS V.

DIURETICS. DIURETICA.

Juniper	*Juniperus*
Oil of ditto	*Ol. ejusdem*
Spirit of ditto	*Aq. composita ejusdem*
Garlic and its Preparations	*Allium et præparat.*
Burdock	*Bardana*
Decoction of ditto	*Decoct. ejusdem*
Squill and its Preparations	*Scilla et præparat.*
Wakerobin	*Arum*
Asarum	*Asarum*
Horse-radish	*Raphan. rustic.*
Water of ditto	*Aq. ejusdem*
Seneka	*Seneka*
Decoction of ditto	*Decoct. ejusdem*
Nitre	*Nitrum vel Kali Nitrat.*
Salt of Tartar	*Sal Tartar. vel Aq. Kali*
Cream of ditto	*Cremor Tartar.*
Ammoniac Salt	*Sal Ammoniac.*
Spanish Flies	*Cantharides*
Tincture of ditto	*Tinct. ejusdem*
Syrup of Meadow Saffron	*Colchic. Syrup.*
Acids	*Acida*
Opium	*Opium.*

CLASS VI.

DIAPHORETICS. DIAPHORETICA.

Saffron	*Crocus*
Tincture of ditto	*Tinct. ejusdem*
Counter-poison	*Contrayerva*

Compound Powd. of ditto	*Pulv. contrayer. comp.*
Guiac	*Guiacum*
Decoction of the Woods	*Decoct. Lignor*
Sarſaparilla	*Sarſaparilla*
Decoction of ditto	*Decoct. ejuſdem*
Antimony	*Antimonium.*

CLASS VII.

SUDORIFICS.	SUDORIFICA.
Opium	*Opium*
Camphire	*Camphora*
Vinegar	*Acetum*
Volatile Alkali	*Alkali volatile*
Muſk	*Moſchus*
Snake root	*Serpentaria*
Tincture of ditto	*Tinct. ejuſdem*
Neutral Salts, *as,*	*Sales medii*, ut,
Mindererus Spirit, &c.	*Sp. Mindereri, Aq. Ammon. Acetat. &c.*

CLASS IX.

CORROBORANTS.	ROBORANTIA.
I. ASTRINGENTS.	I. ASTRINGENTIA, ut,
Red Roſes	*Roſæ rubræ*
Balauſtine Flowers	*Flores Balauſt.*
Tormentill	*Tormentilla*
Oak Bark	*Cort. Querci*
Logwood	*Lignum Campechenſe*
Galls	*Gallæ*
Japan Earth	*Catechu*
Dragon's Blood	*Sanguis Draconis*
Gum Kino	*Gum Kino*
Alum	*Alumen*

Armenian and other Bolar Earths	*Bolus Armena, &c.*
Preparations of Iron	*Ferri præparat.*
Ditto of Copper	*Cupri eædem*
Ditto of Lead	*Saturni eædem*
Ditto of Zinc	*Zinci eædem.*

2. TONICS, *as,*	2. TONICA, ut,
Gentian	*Gentiana*
Leſſer Centaury	*Centaurium minus*
Quaſſy	*Quaſſia*
Simarouba	*Simarouba*
Decoction of ditto	*Decoct. ejuſdem*
Chamomile	*Chamæmelum*
Wormwood	*Abſinthium*
Tincture of ditto	*Tinct. ejuſdem*
Leopard's Bane	*Arnica*
Decoction of ditto	*Decoct. ejuſdem*
Peruvian Bark	*Cortex Peruvianus*
Anguſtura Bark	——— *Anguſtur.*

CLASS IX.

STIMULANTS. STIMULANTIA.

1. AROMATICS, *as,*	1. AROMATICA, ut,
Peppermint	*Mentha Piperitidis*
Spearmint	——— *Sativa*
Lavender	*Lavendula*
Leſſer Cardamom	*Cardamom. minus*
Roſemary	*Roſmarinus*
Cinnamon	*Cinnamomum*
Caſſia	*Caſſia*
Canella alba	*Canella alba*
Caſcarilla	*Caſcarilla*
Wild Valerian	*Valeriana ſylveſtris*
Cochineal	*Coccinella*
Orange Bark	*Cortex aurant.*
Sweet-ſcented Flag	*Acorus.*

2. PUNGENTS, *as*,	2. PUNGENTIA, ut,
Muſtard	*Sinapi*
Nutmeg	*Myriſtica*
Clove	*Curyophylla aromatica*
Mace	*Macis*
Ginger	*Zinziber*
Alcohol	*Alcohol.*

3. BALSAMICS, *as*,	3. BALSAMICA, ut,
Turpentines	*Terebinthinæ*
Canada Balſam	*Balſam Canadenſe*
Capivi Balſam	——— *Copaibæ*
Peruvian ditto	——— *Peruvian.*
Balſam of Tolu	——— *Toletan.*
Myrrh	*Myrrha*
Storax	*Storax*
Tar	*Petreolum.*

CLASS X.

DEOBSTRUENTS.	DEOBSTRUENTIA.
Borax	*Borax*
Madder	*Rubia*
Soap	*Sapo*
Mercury	*Mercurius, vel Hydrar.*
Mezereon	*Mezereon*
Lobelia	*Lobelia*
Antimony	*Antimonium.*

CLASS XI.

SEDATIVES.	SEDANTIA.
Acids	*Acida*
Nitre	*Nitrum, vel Kali Nitrat.*
Opium	*Opium*
Hemlock	*Cicuta*

Deadly Night-ſhade	*Belladonna*
Henbane	*Hyoſciamus*
Camphire	*Camphora.*

CLASS XII.

ANTISPASMODICS.	ANTISPASMODICA.
Amber	*Succinum*
Aſa-fœtida	*Aſa-fœtida*
Galbanum	*Galbanum*
Sagapen	*Sagapenum*
Woodſoot	*Fuligo*
Æther	*Æther*
Caſtor	*Caſtoreum*
Muſk	*Moſchus*
Volatile alkaline Salts	*Sal. alkalina volatil.*

CLASS XIII.

CARMINATIVES.	CARMINATIVA.
Coriander	*Coriandrum*
Dill	*Anethum*
Sweet Fennel	*Fœniculum dulce*
Caraway	*Carvi*
Aniſe	*Aniſum*
Leſſer Cardamom	*Cardamomum minus.*

CLASS XIV.

EMOLLIENTS.	EMOLLIENTIA.
Althea	*Althea*
Quince Seed	*Sem. Cydonior.*
Linſeed	*Lini ſem.*
White Lily	*Lilium album*

Expreſt Oils	*Olea expreſſa*
Gum Arabic	*Gum. Arabicum*
Gum Tragacanth	—— *Tragacanth.*
Starch	*Amylum*
Spermaceti	*Spermaceti*
Axunge	*Axungia, vel adep. ſuilla.*

CLASS XV.

ANTHILMINTICS. ANTHILMINTICA.

Fœtids, *as* Rue, Tanſy, &c.	*Fœtida*, ut *Ruta, &c.*
Bitter and acrid Purgatives, *as* Rhubarb, &c.	*Amara et acria Purgantia*
Tin	*Stannum*
Coweech	*Dolichos*
Cabbage-tree	*Geofræa*
Male Fern	*Filix mas*
Mercury, *as* Æthiops Mineral, &c.	*Hydrargyrus*, ut *Æthiops Mineral, Calomel, &c.*
Lime Water	*Aqua Calcis.*

CLASS XVI.

LITHONTHRIPTICS. LITHONTRIPTICA.

Alkali, both mild and cauſtic	*Alkali cauſtic. et mite, vel Aqua Kali pur. et Aq. Kali*
Soap	*Sapo*
Lime-water	*Aqua Calcis*
Alkaline aërated Water	*Aqua alkalin. aërat.*
Wild Carrot	*Daucus ſylveſtris*
Bear's Whortleberry	*Uva Urſi*
Diuretics	*Diuretica.*

CLASS XVII.

REPELLENTS.	REPELLENTIA.
1. DISCUTIENTS, *as,*	1. DISCUTIENTIA, ut,
Calamy	*Lapis Calaminaris*
Zinc	*Zincum*
Tutty	*Tutia*
Lead	*Saturnum*
Mindererus Spirit	*Sp. Mindereri, vel Aq. Ammon Acetat.*
Vinegar	*Acetum.*
2. COSMETICS, *as,*	COSMETICA, ut,
Balsam of Mecca	*Balsam Meccæ*
Issues	*Fonticuli.*
3. STYPTICS, *as,*	STYPTICA, ut,
Agaric	*Agaric*
Sponge	*Spongia*
Styptic Powder	*Pulv. Styptic.*
Actual Cautery	*Cauterium.*

CLASS XVIII.

CAUSTICS.	CAUSTICA.
1. INFLAMMANTS, *as,*	1. INFLAMMANTIA, ut,
Pellitory	*Pyrethrum*
Mustard	*Sinapi*
Wake-robin	*Arum*
Garlic	*Allium*
Onion	*Cepa*
Leek	*Porum.*

2. VESICANTS, *as*,	2. VESICANTIA, ut,
Spaniſh Flies	*Cantharides*
Racunculus	*Racunculus*
3. CORROSIVES, *as*,	3. CORROSIVA, ut,
Arſenic	*Arſenicum*
Quicklime	*Calx viva*
Concentrated Acids	*Acida acerr.*
Cauſtic	*Cauſticum acerrimum*
Common ditto	——— *commune*
Blue Vitriol	*Vitriolum cœruleum vel Cupri*
Verdigreaſe	*Ærugo Æris, vel Cuprum Acetat.*
Butter of Antimony	*Butyrum Antimonii, vel Antimon. Muriat.*

PART III.

EXTEMPORANEOUS PRESCRIPTION;

OR,

THE PRINCIPAL FORMS & REMEDIES

EMPLOYED IN

THE DISEASES OF INFANCY.

I. Treatment of Children.

The treatment of children at birth depends on making the tranſition from the fœtal ſtate as ſlight as poſſible. This tranſition conſiſts in

1. *Change of Atmoſphere.*

To remedy this, the child ſhould be wrapped up as warm as poſſible, and no other ſtep taken for ſome time. It ſhould then be waſhed with ſoap and water, lukewarm; but, in doing it, the ſkin ſhould be no way fretted, and the expoſure made for as ſhort a time as poſſible.

2. *Change of Circulation.*

To render this as light as poſſible to the conſtitution of the child, no ſeparation betwixt the mother and child ſhould be made till the pulſation in the umbilical cord entirely ceaſes; and then the ligature may be paſſed, as directed Vol. III. p. 131, and the cord cut.

3. *Change of Nouriſhment.*

Milk alone ſhould form the nouriſhment of the child, and nothing elſe ſhould ſupply its place, nor be offered to it, till a proper ſupply fill the breaſt of the mother, or twenty-four hours after delivery, at which time the child's organs are alſo prepared to receive it.

The milk ſhould alſo poſſeſs the proper proportion of its principles: its age ſhould ſuit that of the child, and no other nouriſhment ſhould be interpoſed till the end of the firſt month, when a little boiled bread may be added to it once a day, but no animal food ſhould be permitted till the child is able to walk.

When the mother's milk is deficient, its flow may be aſſiſted by much uſe of diluent or fluid diet; and with this view, alſo, a mixture of milk and beer has been particularly recommended. It is prepared by letting two parts of milk riſe over a gentle fire, and adding to it one part of well-fermented beer previouſly boiled. It is to be taken cold.

When weaning takes place, the uſe of additional nouriſhment muſt be begun for ſome time previous to it; and the child is weaned by anointing the nipple with ſome diſagreeable ſubſtance, as ſoot or aloes.

When the child is brought up by the hand, the ſame principles in the choice of the milk are to be ſtudied as when reared by the mother.

The milk is given by means of a pot, or other inſtrument, in a lukewarm ſtate. It ſhould be prepared by mixing it with a little light animal jelly to render it leſs aceſcent, and have alſo a proportion of ſugar diſſolved in it to increaſe its nouriſhing quality. This milk ſhould be always taken from the ſame animal.

Where milk diſagrees with children brought up in this way, weak beef or veal tea may be ſubſtituted occaſionally in its place, or a ſoup compoſed of beer and the yolk of an egg. The beer muſt be vinous; the yolk of the egg muſt be mixed with a pint of the beer while boiling, and the remainder added when cold.

Whey is the beſt drink for children brought up by the hand; and it ſhould be always made of milk from the ſame cow.

An earlier uſe of additional nouriſhment and of animal food ſhould in general alſo be permitted here.

II. Diseases of Children.

In preſcribing for children, the chief difficulty lies in fixing the appropriate doſe; and hence medicines more frequently fail with

them, or are over-dosed, than with the adult. As a direction, therefore, it is proper to examine in a general manner the proportions fit for this early period of life.

Thus 7 years require half the dose of an adult.
3 years the fourth.
1 year the sixth.
1 month the tenth.

With these proportions in view, where no peculiarity of constitution exists, the doses stated will generally succeed.

The diseases of children to be judged of from the state of the fontanelle and skin.

Incomplete Animation.

Fainting removed by the use of volatiles; as

℞ Lact. Asæfœtid. gutt. iv.
Aq. Font. ʒij. m. *A dose.*

℞ Tinct. Valerian. Sylvest. gutt. iv.
Aq. Menth. ʒij. m. ft. haust. *To be given every two hours.*

Still-birth to be recovered,

1. By warmth, as covering the child with warm cloths, and using the warm bath.

2. By exciting the action of some principal organ, as blowing into the windpipe, inflating the lungs, and expelling it again by pressure on the breast; stimulating the nose and throat by means of a feather; injecting warm glysters, or of tobacco-smoke into the rectum; immersing the placenta in warm water, and forcing the blood into the circulation of the child; employing friction of the surface with stimulants, or striking the soles and nates.

The partial species or discolouration of the face and extremities treated by exciting action of surface by heat, and of the primæ viæ by vomiting or a glyster.

The application of a leech sometimes of use when congestion appears the cause.

Red Gum.

The red-gum is an efflorescence of spots, varying in their size and appearance, confined to the superior parts of the body, particularly the face, cheeks, and neck, fore arms, and back of the hands; but frequently extending also in its progress

over the whole ſkin. They are generally, though not always, preceded by ſome diſorder of the ſyſtem. They are commonly alſo attended with coſtiveneſs.

Treated,

1. By attention to the ſtate of the ſkin or external ſurface, by preſerving its proper temperature, and recalling the eruption, if ſuddenly repelled, by heat, particularly the ſemicupium, or warm bath.

2. By counteracting the internal acrimony which produces the eruption, by abſorbents and laxatives; as

℞ Pulv. Rhæi, gr. ij.
Magneſ. alb. gr. iij. m. ft.
Pulv. laxans.

℞ Aq. diſtillat. ℥i.
Spt. Nuc. Moſchat.
Syrup. Althæa, ā ʒi.
Magneſ. alb. ℈i. m. *A tea-ſpoonful a doſe twice a day.*

℞ Magneſ. alb. ʒij.
Cinnabar. fact. gr. xij. m. ft.
Pulv. ſubtil. gr. v. to ℈i. *a doſe.*

℞ Tartar. Emetic. gr. ½.
Magneſ. alb. ℈i. m. ft. Pulv. gr. v. *a doſe.*

3. By removing uneaſy ſymptoms, as ſickneſs or depreſſion, by cordials.

℞ Aq. Ammon. comp. ℈i.
Aq. diſtillat.
Syr. Caryophyll. ā ℥ij. m. *Two tea-ſpoonfuls a doſe.*

Retained Meconium.

An accumulation of the meconium, or bile, in a highly animaliſed ſtate, precedes birth; and, when not diſcharged after it, is productive of various complaints, as indigeſtion, flatulence, pain, &c. often aſcribed to a different cauſe.

Removed by various laxatives; as,

℞ Mannæ, ʒi. ſolve in
Aq. fervent. ℥ſſ. *A doſe.*

℞ Syrup. Roſæ pallid. ʒſſ. *A tea-ſpoonful a doſe.*

℞ Syrup. de Rhamno.
Simpl. ā ʒij. m. *The ſame.*

℞ Ol. Ricini, ʒſſ. *The ſame.*

℞ Mellis, ℈i.
Seri Lact. ℥i. m. *Laxative Potion.*

℞ Ol. Amygdal.
Syrup. Roſæ,
Aq. diſtillat. ā ʒi. *Two or three tea-ſpoonfuls a doſe occaſionally.*

℞ Magneſ. alb. gr. iv.
Rhuharb. gr. ij.
Sacchar. alb. gr. vi.
Ol. Aniſi, gutt. i. ft. Pulv. *To be given at bed-time.*

℞ Sennæ, ℈i.
Prun. Gallic. N° 3, coque per horæ dimid. in
Aq. Cyath. *Three or four tea-ſpoonfuls every hour till it operates.*

A glyſter of milk and moiſt ſugar may be given lukewarm.

Jaundice.

The icterus infantum is diſtinguiſhed by the ſame yellow colour of the ſkin as in the adult, though in infants the nails are remarked to be free from its tinge. In its progreſs, when continuing ſome time, the yellow deepens, or changes to an orange colour.

Treated by an emetic, ſucceeded by a laxative; and, if prolonged, the uſe of ſaponaceous medicines.

The emetic moſt proper is ipecacuhana; as,

℞ Ipecacuhan. gr. iv.
Syrup. ſimpl. ʒij. m.

The laxative preferred is rhubarb; as,

℞ Pulv. Rhæi, gr. iv.
Syrup. ſimpl. ʒij. m. ft. hauſt.

When not yielding to a repetition of this plan every two or three days, joined with the aſſiſtance of the warm bath and friction of the abdomen, ſaponaceous medicines neceſſary; as,

℞ Aq. Kali, ʒij. — *From two to five drops a doſe in any liquid.*

℞ Sapon. alb. — *A ſmall bit to be diſſolved in milk.*

Roſe.

The infantine eryſipelas conſiſts of blotches, various in their appearance, and rapid in their progreſs, acquiring ſoon a purpliſh or leaden hue, becoming exceedingly hard, and tending frequently to mortification.

Treated by the internal uſe of tonics, particularly the bark and aromatics; as,

℞ Decoct. P. C. Peruv. ℥viij.
(Cort. ℈i. ad. Aq. lib. i.) — *A table-ſpoonful five or ſix times a day.*

℞ Conf. Aromatic. ʒi. — *A little to be diſſolved in each ſpoonful of the decoction.*

The beſt local applications are antiſeptic lotions; as,

℞ Spt. Vinoſ. camphorat. — *Compreſſes dipped in it are to be firſt wrung out, and then applied to the parts.*

℞ Aq. Lithargyr. Acetat. — *The ſame.*

Affection of the Noſe.

The ozæna of infancy is diſtinguiſhed by a diſcharge of matter from the noſe, firſt purulent, and then ſanious; a purple-

ſtreaked eye-lid towards its verge; a difficulty of breathing, particularly in ſleep; and an external fullneſs of the throat and neck, diſcovering, on inſpection internally, the tonſils tumified, of a dark red hue, with aſh-coloured ſpecks, frequently ulceration.

To be treated as the former diſeaſe, by tonic and antiſeptic remedies; alſo,

℞ Pulv. Contrayerv. comp. gr. iij. *To be taken in bark decoction.*

The local treatment, the proper poſition for the diſcharge of the matter, and the uſe of antiſeptic waſhes; as,

℞ Decoct. P. C. P.
Cum Acid. muriatic. gutt. aliquot.

Thruſh.

The thruſh is an eruption of ſpots, appearing generally about the third week, or within the month, on the lips and inſide of the mouth, which continues to ſpread, and at times affects the whole of the alimentary canal, appearing externally at the anus.

Treated by counteracting the ſecretions of the primæ viæ, and by the exhibition of an antimonial emetic; as,

℞ Antimon. Tartar. gr. i.
Aq. fervent. ℥ij. *A tea-ſpoonful a doſe every three quarters of an hour, till vomiting enſues.*

Afterwards, the uſe of abſorbents; as,

℞ Pulv. Contrayerv. C. gr. iij.

℞ Julap. è Creta.
Aq. diſtillat. ā ℥i. *A tea-ſpoonful often.*

When the ſcaling begins, purgatives then proper, as in p. 159; alſo,

℞ Pulv. Scammon. cum Calomel. gr. i.
Rhæi, gr. iij. m. ft. Pulv.

The conſequences of the diſeaſe to be repaired by tonics; as,

℞ Infuſ. Chamæmel. ℥iv.
(Flor. ʒi. ad Aq. lb. i.) *A tea-ſpoonful twice or thrice a day.*

℞ Tinct. Gentian. ℥ſſ. *Five drops a doſe, twice a day, in a little water.*

The local applications to the diſeaſe conſiſt of aſtringents, in various forms; as,

℞ Pulv. Boracis, ʒi.
Sacchar. alb. ʒviij. m. ft. Pulv. *A little to be put often into the mouth.*

℞ Boracis, ℈ij.
Mellis, ℥i. m. ft. Elect. *The ſame.*

℞ Mellis, ℥ſſ.
Spt. Vitriol. vel
Spt. Salis Marin. gutt. ii. m. *The ſame.*

℞ Infuſ. Roſæ Rulræ, ℥ij.
Mellis, ʒij. m. *The ſame.*

Excoriations of anus removed by ſedative waſhes; as,

℞ Extract. Goulard.
Vin. Gallic. ā gutt. xxx.
Aq. Font. ℥iv. *The parts to be bathed with this once or twice a day.*

Skin-bound.

The diſeaſe termed Skin-bound is a peculiar affection, diſplayed in a yellowiſh-white colour of ſkin, its tightneſs or fixed ſtate to the parts below, and its hard reſiſting feel, particularly on the face and extremities. To theſe ſymptoms are joined coldneſs of the child, its apparent pain, and death-like appearance.

The external treatment lies in the uſe of the warm bath, rendered ſtimulant by a ſolution of ſalt and ſoap; in friction, and bliſters.

The internal, in the previous exhibition of a laxative, as in p. 227, and then carminatives and antiſpaſmodics; as,

℞ Pulv. Rhæi, gr. xv.
Magneſ. alb. ʒſſ.
Aq. Fœnicul. dulc.
Anethi, ā ʒvi.
Syrup. Roſæ pallid. ʒſſ.
Spt. Ammon. comp. gutt. xxx. m. *Two or three ſpoonfuls a doſe, twice or thrice a day.*

℞ Aq. Menth. Pip.
Roſæ, ā ʒi.
Spt. C. C.
Tinct. Valerian. Sylveſt. volat. ā ʒi.
Syrup. ſimpl. ʒſſ. m. *The ſame.*

Convulſions.

The convulſions of children are generally preceded by ſlight ſymptoms of diſtortion of the face; as, involuntary laughter when aſleep or awake, ſquinting of the eyes towards the noſe, or turning them upwards, the child, at the ſame time, changing to a blueiſh colour. The fit itſelf is diſtinguiſhed by diſtortions, more or leſs general according to the violence of the attack. Theſe diſtortions are either of the members in ſucceſſion, or of the body all at once. They are attended with the uſual ſymptoms of froth or frothy diſcharge from the mouth; and they are terminated by profound ſleep, from which the child awakes unconſcious of its former ſtate.

The treatment depends on the particular cauſe of irritation.

The lock-jaw treated by cleaning out the primæ viæ, by injection or laxatives, as in p. 227, ſo as to remove the meconium.

The ſpaſm of the part to be then attacked by the warm bath, by local ſtimulants, along with friction and bliſters; as,

℞ Ol. camphorat. ʒi. *A little to be rubbed on the parts.*

℞ Balſam. Anodyn. ʒi. *The ſame.*

The uſe of tonic and ſtimulant medicines proper during this treatment; as,

℞ Julep. Moſchat. ʒij.
Aq. diſtillat. ʒi. ſſ. M. *A tea ſpoonful often.*

℞ Aq. Menth. Pip. ʒss.
distillat. ʒi.
Ol. Succini, gutt. iv.
Sal Volat. gutt. ij.
Syrup. simpl. ʒss. M. *A tea spoonful often.*

℞ Aq. Fœnicul. dulc.
Syrup. simpl. ā ʒi.ss.
L. L. gutt. x.
Moschi, gr. ij. M. *The same.*

Also wine, diluted spirits, and other cordials, are proper.

Inward Fits.

The symptoms which distinguish this second form of early convulsions, termed inward fits, are, a little blueness of the lips, slight turning up the eyes, and a peculiar sound of voice, with quick intervals of breathing.

Treated by the exhibition of an emetic, as in p. 273, and afterwards the use of volatile and fœtid medicines, as in the former disease; also,

℞ Ol. Succini, gutt. vi.
Tinct. Asæ fœtid. gutt. xxx.
Syr. simpl.
Lac Amygdal. ā ʒij. M. *A tea-spoonful often.*

℞ G. Asæ fœtid. ℈ss.
Solve in Aq. Cinn.
Font. ā ʒiv.
Tinct. Valerian. volat. ʒi.ss. M.
The same.

Abdominal Complaints.

The chief abdominal complaints that attend infancy are wind and costiveness; and these complaints assume various symptoms, from simple griping pain and crying, drawing-up the legs and scrotum to the height of actual spasm, and convulsions.

The use of laxatives, combined with aromatics, the proper remedies; as,

℞ Tinct. Aloes comp. ʒij. *From five to ten drops a dose, in any liquid.*

℞ Pulv. Sennæ, gr. ij.
Zinziber. gr. i. to v. Pulv. *To be given in pap.*

℞ Magnes. alb. gr. iv.
Aq. Anethi, ʒij.
Syrup. Rosæ, ʒi. M. ft. haust. Laxans.

℞ Pulv. Rhæi, gr. xii.
Magnes. gr. viij.
Tinct. Rhæi, ʒi.
Syrup. Papaver. ℥ij.
Aq. Menth. ʒi.ff. M. *Two or three tea-spoonfuls a dose every four hours.*

℞ Ol. Ricini, ʒij
Mucilag. G. Arabic.
Syrup. Mannæ, ā ʒi.
Spt. Ammon. Comp. gutt. x. M. *Two tea spoonfuls a dose.*

Where these laxatives are not sufficient, a suppository may be used to remove costiveness; or, instead of it, some of the drastic purgatives; after which, the former remedies will be sufficient.

The best purgative is a glyster of milk, in which 20 grains of aloes are dissolved.

When wind is the chief symptom of uneasiness, external heat, either dry, or by fomentation, affords the quickest relief.

Attention to the food necessary, to prevent a relapse.

Watchfulness.

To be treated as arising from the former complaints, or by a proper regulation of the child, in regard to the times of sleep.

Vomiting,

In children, is seldom an idiopathic disease; it is generally a consequence of some other morbid state.

When from repletion, no treatment necessary.

When from disease, to be treated according to the particular cause.

Thus, when the ſour ſmell, or green clayey ſtools, mark predominant acidity, abſorbents the proper remedy; as,

℞ Magneſ. alb. ʒij. *A little to be mixed with the food, and given often.*

As alſo he alkaline preparations in p. 274.

When from morbid irritability, tonics are then indicated; as,

℞ Infuſ. C. Peruv. ℥iv.
(ϑi. to ℥iv.) *A tea ſpoonful or two a doſe.*

℞ Flor. Chamæmel. ϑi.
Cort. Aurant. gr. x.
Pulv. Zinziber. gr. v.
Infunde in Aq. ℥v. et cola. *The ſame.*

Or external applications of the ſame kind; as,

℞ Balſam. Anodyn. *A little to be rubbed on the pit of the ſtomach.*

℞ Spirit. Vinoſ. Camphorat. *The ſame.*

℞ Emplaſt. Labdani, ℥ſſ.
Theraic. ʒi. m. ft. Emplaſt. *To be applied on the region of the ſtomach.*

℞ G. Maſtic.
Stor. Calamin.
Pulv. Nuc. Fr. Myriſticæ
Ol. Myrti.
Flor. Balauſt. ā ʒi.
Ceræ et Terebinth. ā q. ſ. ut ft. Emplaſt.
alut. extenſ.

℞ Ungt. Simpl. ʒiij.
Ol. Macis.
Roſmarin. ā ϑſſ.
Balſam. Peruv. ϑij. m. ft. Ungt. *With a little of which the region of the ſtomach is to be frequently anointed, and then covered with warm flannel.*

When from ſuppreſſed eruption, marked by the preſence of

general fever, it is to be recalled by means of the warm bath, the application of friction after it, and a blister or warm plaster to the region of the stomach, with the proper use of cordials.

When from interrupted discharge, the return of the latter is to be solicited by some irritating application.

Inflammation of Stomach.

The gastritis infantum is a rare disease, and distinguished by great pain in the region of the stomach, very frequent in its recurrence, and marked by violent contorsions or writhings, and the application of the child's hand to the part.

Treated by cooling laxatives, as in p. 227.

When more severe by blisters to the part, by fomentations, and the warm bath.

Gripes

Are treated as abdominal complaints, p. 278.

Looseness.

Diarrhœa is one of the most frequent complaints of infancy, and one which, unless severe, is hardly to be considered in children as a real morbid state. By it, nature, with them, most commonly throws off any offending cause. Its causes, therefore, and treatment, require very particular attention.

To be treated according to the particular indication arising from the appearance of the discharge, and the cure to be always premised by an emetic, as in p. 227.

When the discharge indicates predominant acidity, rhubarb and absorbents the chief means of cure, with an occasional anodyne.

℞ Pulv. Rhæi, gr. xv.
Cret. alb. ℈i.
Sacchar. alb. ʒi.
Aq. Menth.
Font. ā ʒi. ff. m. *Two tea spoonfuls a dose.*

℞ Pulv. Cret. alb. ℈ij.
Conf. Japonic. ℈i.
Sacchar. alb. ʒi.
Aq. Anethi, ʒij. m. *The same.*

℞ Vin. Rhæi, gutt. x.
Tinct. Opii, gūtt. ij.
Aq. Cinn.
Syr. Simpl. ā ʒi. m. fiat hauſt.

When ſtool ſlimy, alkalies required, as in p. 228.

When watery, bloody, and dyſenteric, a ſmart purge ſhould premiſe, as in p. 227; and then cordials and glyſters of warm milk and demulcents ſucceed.

Dentile diarrhœa demands a difference in the treatment, though the cure depends on the operation or protruſion of the teeth.

Watery gripes, or infantile dyſentery, is more obſtinate in its effects.

An emetic ſhould be premiſed here in a full doſe, followed by a laxative; and the reſt of the treatment to be varied according to the particular ſymptoms.

If ſymptoms mild, the cure then is to be truſted to ſmall doſes of ipecacuhan or antimony; as,

℞ Pulv. Ipecacuhan. gr. i.
Magneſ. alb. gr. xvi.
Pulv. Aromat. gr. vi. m. et divid. in doſ. viij. *One every four hours.*

℞ Vin. Antimon. gutt. xij.
Aq. Cinn.
Syrup. Cois, ā ʒiij. m. *A tea-ſpoonful a doſe every four hours.*

If a predominant acidity ſeems to continue the irritation alkalies then proper, as in p. 226; alſo,

℞ Tinct. Myrrh.
Spt. Ammon. ſuccinat. ā ʒij. m. *Five drops a doſe, in any liquid.*

℞ Sapon. Venet. ʒij.
Margarit. preparat. ʒi.
Chel. Cancr. ʒi. ff.
Syrup. Altheæ, ʒ ff.
Aq. Menth.
Anethi, ā ʒiij. m. *A large tea-ſpoonful every ſix or eight hours.*

When weakneſs, not irritation, occurs to keep up the diſcharge, aſtringents, tonics, and anodynes then proper; as,

℞ Balſam. Locatelli, ʒi.
Conſerv. Roſæ rubræ, ʒij. m. *The ſize of a bean a doſe, three or four times a day.*

℞ Decoct. Lign. Campechenſ. ʒviij. *A table-ſpoonful a doſe.*

℞ Amyli, ℈i.
Aq. Cinn. ſ. ʒſſ.
Tinct. Opii, gutt. v.
Sacchar. alb. ℈ij. m. ft. hauſt.

℞ Ennema ex Amylo.
Cum L. L.

External applications are alſo here employed; as,

℞ Axung. Anſerin. ʒij.
Ol Maciſ. ʒi.
Menth. Sativ. ℈i.
Bacc. Juniper.
Chamæmel. ā ℈ſſ. m. ft. Liniment. *The region of the ſtomach and umbilicus to be frequently anointed with it.*

℞ Theraic. Venet. ʒi.
Ol. Maciſ. ʒij.
Ol. Myriſtic. gutt. iij. m. et ft. emplaſt.

Incontinence of Stools.

Palliated by cold affuſion till the parts acquire ſtrength.

Worms.

The ſymptoms enumerated as diſtinguiſhing worms are, pain and acid eructation of ſtomach, variable appetite, foul tongue, fœtid breath: the belly full, hard, and tenſe, with occaſional gripings or pains in different parts of it, particularly about the navel; irregular ſtate of the belly, heat and itchineſs of the rectum, urine white and limpid, often diſcharged with difficulty. With theſe ſymptoms are joined a dull appearance of the eye, often dilation of the pupil, itchineſs of the noſtrils, ſhort dry cough, ſlow fever, with evening exacerbations, and irregular pulſe, grinding of the teeth in ſleep, &c.

Their treatment depends on effecting their expulsion, and preventing their future generation.

The first accomplished by means of the different medicines detailed in vol. I. p. 341. Also,

℞ Hydrargyr. cum Sulphur. ʒi.
Pulv. Rhæi, ℈iv. m. et divid. in dose No. 28.
One twice a day.

℞ Hydrargyr. cum Cretâ,
Magnes. alb. ā gr. vi. m. ft. Pulv. *To be taken at bed-time.*

℞ Limatur. Stanni, ʒij.
Hydrargyr. ʒiij. m. ft. Amalgam.

℞ Hujus Amalgam. gr. viij.
Pulv. Rhæi, gr. iv.
Calc. Antimon. illot. gr. iij.
Mellis, q. s. ut ft. Bolus. *To be taken every morning.*

℞ Pulv. Rubig. Ferri, gr. v.
Sacchar. alb. gr. x. m.

℞ Auri Musiv. ℈ij. *To be taken twice a day in any convenient vehicle. To be followed by a purge every fourth or fifth day.*

External applications are also favourite remedies for worms; as,

℞ Aloes Succot.
Pulv. Flor. Chamæmel. ā ʒi.
Terebinth. Venet. q. s. ut ft.
Emplast. *To be applied to the region of the navel.*

℞ Fel. Bovin.
Aloes, ā ʒi.
Axung. ʒi. m. ft. Linim. *The parts below the navel to be anointed with it twice or thrice a week.*

Convulsions.

The appearance of infantine convulsion differs nothing from that which attacks the adult. The body becomes either convulsed

all at once, or the limbs; the jaws are locked, and the mouth filled with ſlime. In this ſtate the child continues till ſleep ſupervenes, from which it awakes pretty well, till the ſame appearances are renewed at interval of various diſtance. It is divided into two ſpecies, the ſymptomatic and idiopathic.

Symptomatic.

When from ſtate of the primæ viæ, or adheſive nature of the food, its treatment depends on change of diet and the uſe of laxatives, particularly the caſtor oil, as in p. 273.

When from teething, the protruſion ſhould be haſtened by ſcarification.

When from retropelled eruption, the warm bath uſeful, and ſoliciting a diſcharge by bliſters

When from worms, the remedies to be employed detailed in that diſeaſe, vol. I. p. 341.

Idiopathic.

The treatment here conſiſts in the moſt powerful means of removing general irritation, by blood-letting, by leeches to the foot or behind the ears, by bliſters, and by proper exhibition of laxatives.

When ſymptoms ſtill continuing, antiſpaſmodics then indicated, as in p. 232. Alſo,

℞ Aq. diſtillat. ℥ij.
Tinct. Valerian. volat.
Spt. Ammon. fœtid. ā ʒſſ.
Caſtor. Ruſſic. ℈i.
Sacchar. alb. ʒij. m. *A tea-ſpoonful a doſe.*

℞ Aq. Font. ℥ij.
Tinct. Fuligin.
Valerian. volat. ā ʒſſ.
Syrup. ſimpl. ℥ſſ. m. *The ſame.*

℞ Caſtor. ℈i.
Sal. C. C. gr. viij.
Aq. Cinn.
Font. ā ℥i. ſſ.
Conf. Damocrat. ℈i. m.

℞ Mucilag. G. Arabic. ℥i. ff.
Syrup. ſimpl. ʒij.
Ol. Aniſi.
Rutæ, ā gutt. iv. m. *The ſame.*

℞ Spermaceti, (v. o. ſ.) ʒi.
Aq. diſtillat. ℥iij.
Syrup. Toletan. ℥ff.
Ol. Aniſi, gutt. xii. m.

℞ Moſchi, gr. x.
Aq. diſtillat. ℥ij.
Syrup. Zinziber. ℥i. m.

External applications are alſo employed with the ſame view; as,

℞ Balſam. Anodyn. ℥ff.
Ol. Macis, ʒi.
Ol. Menth. ♆i. et ft. Ungt. *With which the back-bone, palms of the hands, and ſoles of the feet, are to be anointed.*

℞ Ol. Oliv. ℥i.
Ol. Succini, gutt. xxx.
Ol. Terebinth. ♆i. m. ft. Liniment.

Where convulſions aſſume a chronic form, an iſſue then proper; with the uſe of tonics, particularly chalybeates, in the form of a mineral water.

Palſy

Is a rare diſeaſe in children: it does, however, occur at times, and that in different degrees, the ſame as in adults.

The treatment requires particular attention to the ſtate of the primæ viæ, as in p. 227; afterwards the uſe of antiſpaſmodics, internal and external, as in the former diſeaſe, or electricity.

When connected with hydrocephalus, the treatment of this laſt forms the primary indication.

Epilepſy

Conſiſts in the child ſuddenly and unconſciouſly falling down; when convulſion takes place, either with or without the loſs of the ſenſes.

The treatment the ſame as in convulſions; by firſt removing irritation of the primæ viæ, by laxatives, and afterwards the uſe of tonics.

St. Vitus's Dance.

This diſeaſe conſiſts of partial convulſions, or continual motion, of the extremities of one ſide, ſeldom extending its attacks beyond the fifteenth year. Its cauſes are, generally, predominant irritation in the primæ viæ, of various kinds, or elſe general relaxation of the ſyſtem.

To be treated as in the former diſeaſe, by attention to the firſt paſſages and the uſe of tonics.

Night-mare

Is an affection well known: it conſiſts of a ſenſe of oppreſſion, weight, and tendency to ſuffocation, varying in its period of duration, and alſo in the degree to which it attains. It is an affection common to children as well as adults; and it can hardly be deemed a diſeaſe, as they frequently outgrow it. The fit, however ſhort in duration, always leaves ſome unpleaſant effects, as lightneſs of head, tremor, and anxiety; but theſe are merely temporary.

Treated by avoiding flatulent diet, and rouſing from the fit by volatile and fœtid medicines, as in the former diſeaſes.
The cold bath and tonics are proper preventatives.

Temporary Loſs of Speech,

Or a difficulty in utterance, is frequent with ſome children, from the fourth to the ſeventh year. It forms in its attack only a temporary inconvenience, ſeldom exceeding a quarter of an hour at a time.

To be treated as the other convulſive diſorders deſcribed.

Excoriations of Skin.

Excoriations of different parts of the cuticular ſurface, either from its delicacy or particular cauſes of irritation, is a common complaint of children; but the part moſt liable to this, and requiring often a ſpecial treatment, is behind the ears.

Simple excoriation requires only cold waſhing or affuſion, and the application of ſome mild aſtringent, as the ſinged rag.

The ulcerated ſpecies to be treated firſt by abſorbent laxatives, as in p. 226; afterwards by ſome alterative preparation of mercury, as

℞ Hydrargyr. cum Sulphur. gr. v. *for a doſe.*

℞ Calomel. gr. i.
Pulv. Rhæi, gr. ij. m. ft. Pulv. *The ſame.*

To the part itſelf the ſame applications may be made; as,

℞ Calomel. ʒi.
Ungt. Sambuc. ʒi. m. ft. Ungt.

Bliſters occaſionally uſeful in the neighbourhood.

Auricular Abſceſs.

Matter diſcharged from the ears in various quantities, and alſo with various appearances of inflammation, both in degree and extent, are common to childhood.

To be treated by obviating inflammation, by the uſe of laxatives, as in p. 227, and giving a diſcharge to the matter; afterwards uſing aſtringent waſhes, as in vol. II. p. 413; and, if ineffectual, having recourſe to warm ſtimulants, as in vol. I. p. 344, and vol. II. p. 440.

℞ Ol. Amygdal. ʒſſ.
Camphor. ϑi. *A little to be dropped into the ear.*

℞ Ol. Amygdal. ʒſſ.
Spt. Lavend. C.
Tinct. Caſtor. *a* gutt. xxx. m.

℞ Aq. Lithargyr. acetat. gutt. x.
Spt. Camphorat. gutt. xx.
Aq. diſtillat. ℥viij. m. ft. inject.

When reſiſting this treatment, mercurial alteratives to be given, as in the former affection, an iſſue opened near it, and purgatives employed to the part.

Fevers.

The fevers of infants are generally ſymptomatic, and not ſuch as occur in the adult.

Catarrhal Fever

Is diſtinguiſhed by cough, hoarſeneſs, and difficulty of breathing, with affection of the noſe and eyes, only varying from the catarrh in the adult by the violence of its ſymptoms.

The treatment conſiſts in leſſening the irritation on the breaſt by blood-letting, by a leech or two to the foot, followed by the application of a bliſter to the region of the ſtomach.

If much phlegm, an emetic may then be exhibited, as in p. 227.

The uſe of oily medicines will quiet the irritation of the cough; as,

℞ Ol. Amygdal.
Syrup. Violar. ā ℥i.
Spermaceti, ℥i. m. *A tea-ſpoonful a doſe often.*

℞ Pulv. Tragacanth. comp.
Spermaceti, ā ℥i.
Syrup. ſimpl. ℥ij. m. *The ſame.*

℞ Syrup. Papaver. ℥i. *The ſame.*

The bowels, in the progreſs, to be kept open by laxatives, as in p. 227.

Stomachic Fever.

The leading indication here is the exhibition of an emetic, when relief of all the ſymptoms will follow.

Inteſtinal Fever.

To be treated in the ſame way, followed by laxatives, either abſorbents, as in p. 226; or draſtics, as in p. 227, according to circumſtances.

When fever protracted, ſaline draughts, with antimonials, proper, as in vol. I. p. 274, and afterwards the bark.

Conſequences of Fever.

The appearance of eruption muſt be left to time.

Cervical pain and tumor yield to heat and embrocations, as in p. 229.

Intermittent Fever.

Its ſymptoms are the ſame as in the adult, conſiſting in a regular ſucceſſion of cold, hot, and ſweating fits, with the intermiſſion of a certain period before their repetition; and this intermiſſion is chiefly diſtinguiſhed by a high-coloured urine, with a laterious or red ſediment.

To be treated in the ſame way as in the adult, vol. I. p. 274.

Firſt premiſing an emetic, then continuing mild diaphoretics for ſome time, as in p. 98, and afterwards throwing in the bark, as in vol. I. p. 340.

The bark often employed externally here, as by poultice to the ſtomach, or quilted in a waiſtcoat.

Ague-cake, if forming, to be treated as in the adult, vol. I. p. 327.

Dentition.

The ſymptoms that mark dentition are—

1. A tendency to drivel or ſlaver much, with ſtarting, and thruſting the fingers into the mouth.

2. Expanſion, heat, and ſwelling of gum.

3. A circumſcribed red or hectic fluſh on the cheek.

4. Eruptions on the face and ſcalp.

5. Diarrhœa, with its uſual irritation, or griping and morbid ſtools.

6. Spaſms, and general irritation of the nervous ſyſtem, preventing ſleep.

7. Alteration in the ſecretion and appearance of the urine; and,

8. Sometimes ſwelling of the extremities, though rare.

The morbid ſtates then requiring relief are the dentile fever and convulſion.

The dentile fever treated by dilution and keeping up diarrhœa by laxatives, as in p. 227, or by ſmall doſes of antimonials.

In retention of urine, clyſters and the warm bath neceſſary.

Where diarrhœa ſpontaneous and exceſſive, to be reſtrained by the teſtacea, joined with compound ſpirit of ammonia or laudanum.

The Dentile Convulſion.

Treated in the ſame manner as fever, along with the application of bliſters behind the ears or to the back; but the moſt certain relief ariſes from the operation.

Inflamed and ulcerated gums, during dentition, to be treated by cooling ſedative applications; as honey ſharpened with a little weak vitriolic acid, ſyrup of white poppies; or, failing theſe, aſtringent applications are to be made, as employed under the head canker.

Mumps.

The mumps are a ſwelling of the neck and throat, or the parotid and maxillary glands, from the appearance of which the name is derived; attended with reſpiration and deglutition little impeded, and inflammatory fever generally ſlow.

To be treated by mild diaphoretics, as in vol. I. p. 274, and an occaſional laxative, as in p. 227.

Conſequences of the diſeaſe, or chronic ſwelling of the part, to be obviated as in vol. II. pp. 429 and 435.

Croup.

Croup is a diſeaſe formerly treated of, vol. I. p. 15. Its ſymptoms are, a ſharp ſhrill cough, with ſtridulous noiſe; laborious or

wheezing reſpiration; flushed face, increaſed to lividity during each paroxyſm; little external ſwelling, and general fever.

Treatment as in vol. I. p. 282.

A more modern practice is, the uſe of opium and emetics.

The Tinct. Opii is given in doſes of ſix or eight drops, every two hours, till a remiſſion of the ſpaſm takes place; and an emetic, exhibited daily, to prevent the accumulation of phlegm.

Symptomatic coughs cannot be disjoined, in their treatment, from that of the diſeaſe with which they are connected.

Chin-cough.

The chin-cough, or hooping-cough, is a contagious diſeaſe, attacking in paroxyſms of a convulſive ſuffocating cough, with loud noiſe or hoop at each reſpiration, and generally terminating by vomiting.

Treatment depends on the ſtate of the ſyſtem, or the tendency to inflammation or ſpaſm.

In the firſt, bleeding and bliſters become neceſſary, with the uſe of mild diaphoretics, as in vol. I. p. 274; and an occaſional laxative, as in p. 227.

In the ſecond, emetics and antiſpaſmodics form the chief remedies, as in p. 240; alſo,

℞ Antimon. Tartar. gr. ij.
Cryſtall. Tartar. gr. v.
Aq. diſtillat. ℥v. m. *A tea-ſpoonful every half hour.*

Where cough very troubleſome, an opiate uſeful, particularly the cicuta; as,

℞ Lact. Ammoniac. ℥iv.
Extract. Cicut. gr. ij. m. *A table-ſpoonful a doſe.*

℞ Julep. è Moſcho. ℥vi.
Tinct. Opii camphorat. ℥ſſ.
Tinct. Valerian. volat. ℥i. *Two tea-ſpoonfuls thrice a day.*

℞ Lact. Ammon.
Aq. Cinn. ten. ā ℥ij.
Tinct. Caſtor. ℥ij.
Syr. Balſam. ℥ſſ. m. *The ſame.*

External antiſpaſmodics are alſo employed here; as, rubbing the hands and ſoles with ſpirit of ammonia; oil of mace, or amber, to the ſpine and pit of the ſtomach; anointing the ſoles with ointment of garlic and hogs'-lard.

The recurrence of the diſeaſe is cut ſhort by an emetic, and a return to the uſe of antiſpaſmodics.

Change of air and milk diet are proper additions to the treatment.

Common Spaſmodic Cough.

This complaint is marked by the ſame appearance of cough as chin-cough; but no fever attends it. It differs alſo from catarrh in the abſence of the catarrhal ſymptoms, and alſo in antiphlogiſtic remedies having no effect.

Its treatment requires ſimply the uſe of antiſpaſmodics.

Cutaneous Diſeaſes.

Raſh.

The moſt common ſeat of raſh is the face, neck, and breaſt: its appearance is moſt common about the decline of ſummer, or the months of Auguſt and September: it is equally ſudden in its eruption and departure. A little ſickneſs is apt to ariſe when this laſt takes place, but it is merely temporary.

Attention to the primæ viæ the only treatment required; and, where coſtiveneſs prevails, laxatives employed, as in p. 227.

Baſtard Itch.

Baſtard itch is an eruption affecting the face with watery-headed veſicles and foul blotches, reſembling, in its appearance, the common itch or pſora: it is chiefly peculiar to the period of teething, and the decline of acute febrile or inteſtinal complaints.

Treatment, avoiding cold, and the ſame medicines as in raſh.

Milk Blotches.

The cruſta lactea, or milk blotches, is an eruption of white veſicles, which aſſume a dark colour, reſembling the blackening

of the ſmall-pox, and are ſucceeded by ſcabs producing an ichory matter, attended with conſiderable itchineſs.

To be treated by ſome ſulphureous mineral, or an infuſion of the viola tricolor.

℞ Pulv. Violæ, ʒi. coque in
Lact. lb. i. ff. ad lb. i. *To be taken in the courſe of the day.*

Anomalous Eruption.

Anomalous eruptions, during the time of teething, are ſo various in their appearance, that no certain deſcription can be given of them.

Their treatment conſiſts in moderating fever, if preſent, by mild diaphoretics, as in vol. I. p. 274; and attention to the primæ viæ.

Nettle-raſh.

This is a raſh affecting the breaſt and lower limbs, with an appearance reſembling the ſtinging of nettles.

Its management requires ſome mild ſudorific, as in vol. I. p. 274, and regulating the ſtate of the primæ viæ.

Phlyctenæ.

Phlyctenæ conſiſt of veſications or bliſters ſimilar to burns, varying in their ſize and the period of their continuance, which is generally ſome days. They contain an acrid lymph when opened.

The uſe of abſorbents indicated, as in p. 226.

Scorbutic Eruption.

This is an eruption which diſcharges a thin ſharp ichor, and infects the face and neck, attended with excoriation wherever it touches.

Treatment difficult. The water-parſnip reckoned ſpecific, with attention to the ſtate of the primæ viæ.

℞ Succ. Sii, Aquat. lb. i. *A ſpoonful four or five times a day in milk.*

Grocer's Itch.

This eruption appears in ſome parts like the points of pins, with watery heads; at other times as large as peas, which do not itch or feel ſore. But it appears alſo frequently in foul blotches, which degenerate into ſcabby ſores.

Its treatment by mercurial alteratives, as in vol. I. p. 345, and vol. IV. p. 242; and externally by the ſame applications; as,

℞ Ungt. Hydrar. Nitrat.
Sulphur. ā ʒſſ. *To be applied to the ſores.*

Ring-worm.

A ſpecies of herpes, or broad ring-worm, is very apt to affect thoſe parts of the child that are fretted by its dreſs. The ſkin exhibits a very inflamed appearance, without much pain.

To be treated as phlyctenæ.

Small-pox.

The ſmall-pox is a fever generally of the inflammatory or typhoid ſpecies, attended with a local inflammation and pain of particular ſeparate points of the internal and external ſurface, forming an eruption. The appearance of this eruption is from the third to the ſeventh day of the fever, terminating in eight days from this appearance by the falling off of cruſts, which leave a pit or mark behind.

To be treated as in vol. I. p. 293; and alſo, when bark uſed in confluent kind.

℞ Cinchonæ in Pulv. trit. ʒiij. ſſ.
Myrrh. in Pulv. ʒſſ.
Spt. Vin. ten. lb. i. degere et cola. *A tea-ſpoonful thrice a day, with the addition of ten drops of diluted vitriolic acid.*

℞ Cinchonæ,
Flav. Pulv. craſſ. ℥ſſ.
Roſar. rubr. exſiccat. ℥ij.
Aq. fervent. ℥xij.
Macera et cola,
Infuſ. ℥vij. adde
Acid. Vitriol. dilut. ℥i. m. *A cupful every four hours.*

℞ Decoct. Peruvian. ℥i. ſſ.
Spt. Cinn. ℥i. ſſ.
Acid. Vitriol. dilut. gutt. x.
Syrup. Croci, ℥i.
Tinct. Opii, gutt. iv. m. ft. hauſt.

Meaſles.

The meaſles are a continued inflammatory fever, attended with an eruption in the form of cluſters, little prominent, and reſembling flea-bites, marked by a vivid redneſs, gradually decreaſing till deſquamation enſues.

To be treated as in vol. I. p. 293.

Chicken-pox.

The chicken-pox reſembles the ſmall-pox ſomewhat in its general appearance; but it differs from it in its ſymptoms, in its progreſs, and in its duration.

Requires no ſpecial treatment but a laxative.

Scarlet Fever.

The ſcarlet fever, in infancy, is for the moſt part of the typhoid form, with or without an affection of the throat, and always marked by a roſy efflorescence of the ſkin.

To be treated, when of the mild kind, as in vol. I. p. 274. When ſhowing a putrid tendency, bark and acids to be exhibited, as in confluent ſmall-pox, vol. I. p. 293.
Antiſeptic gargles alſo to be uſed, as in vol. I. p. 319.

Miliary Fever.

The miliary fever is a diſeaſe rarely attacking children, unleſs epidemic; and then it is diſtinguiſhed by the uſual ſymptoms, as in other caſes.

To be treated as in vol. I. p. 274.

Scald Head.

Tinea conſiſts of a ſcaly eruption of the ſkin of the head or hairy ſcalp. It is attended with various degrees of acrimony, and becomes accordingly more or leſs infectious in its nature.

The preliminary ſtep—ſhaving the head, or cutting the hair cloſe; and the bathing the head with ſoap and water, or cream and honey, or with the following fomentation:

℞ Fol. Abſinthii,
Abrotan. ā ℥i. coque in
Aq. Font. lb. iv. ad. lb. i. ff. adde
Spt. Camphorat.
Aq. Kali, ā ℥ij. m.

℞ Infuſ. Nicotianæ.

To be afterwards cured chiefly by topical applications, as in vol. I. p. 346. Alſo,

℞ Ungt. Sulphur.
Hydrargyr. ā ℥ff. m. *A little to be rubbed in every night.*

℞ Ungt. Nicotianæ, ℥i.
Petreol. Barbad. ℥ff.
Balſam. Peruv. ℈i. m. ft. Ungt.

℞ Ungt. è Pice, ℥i.
Pulv. Hellebor. alb. ℥i. m. ft. Ungt.

℞ ☿ corroſiv. ſublimat. gr. x.
Aq. diſtillat. lb. i. m. *Waſh for the ſores.*

℞ Flor. Sulphur.
Pulv. Sinapi.
Stapheſa-griæ, ā ʒi.
Axung. Porcin. ʒi. m. ft. Ungt.

When the diſeaſe is obſtinate, internal alteratives may be proper, as a grain of calomel every night, or a doſe of Æthiop's mineral waſhed down with the decoction of wood, as in p. 158, or lime-water. An iſſue in the neck will be alſo uſeful.

Itch.

This diſeaſe we already conſidered in vol. I. p. 221: it is chiefly introduced here to remark ſome peculiarities in its treatment in infancy.

To be treated as in vol. I. p. 345.

Shingles.

The herpes, or ſhingles, is of two kinds; the miliaris, or ring-worm, and the exedens.

The miliary kind is to be treated chiefly by ſtimulating and aſtringent applications, as ink thickened with muſtard flour, ſpirit of wine, and ſaturnine or zinc lotions, as in vol. II. p. 413. Of ointments, the nitrated mercury is beſt.

The eating or ulcerous herpes is to be attacked by internal remedies, as in vol. I. p. 220.

The external applications are the ſame as in the former ſpecies; and, when obſtinate, cauſtics may be occaſionally proper.

Venereal Diſeaſe.

The lues of infancy we find generally diſplays itſelf firſt about the genitals and nates; more rarely it attacks the face, breaſt, and lower extremities. Its appearance in theſe ſituations is firſt in the form of copper-coloured puſtules, ſimilar to what diſtinguiſh the ſecond ſtage of the conſtitutional diſeaſe in the adult. Theſe puſtules ſpread, and the body is covered with an appearance from them of what are commonly named *ſcorbutic ſpots*. Inſtead of puſtules, however, it is frequently ob-

ſerved in the form of livid blotches. Whichever of theſe appearances it aſſumes, it continues to ſpread about the face, eyebrows, chin, &c. having the ſame appearance as when recovering from the confluent ſmall-pox. The mouth alſo comes internally to be affected, and here it diſplays an appearance ſimilar to aphthæ. Theſe change into ſores, and gradually ſpread backwards to the fauces, and forwards to the lips and noſtrils, occaſioning ſtoppage of the noſe, difficulty of breathing, and other ſymptoms attending an impeded action of theſe parts. The nurſe's nipples then begin to turn raw, and to aſſume the appearance of chancre; and in this way the diſeaſe is tranſmitted from the child. With time, the body of the child becomes wholly covered with ulcerations; but, before arriving at this height, the conſtitutional diſeaſe generally diſplays itſelf on the nurſe by ulcerations of the throat.

In the cure, mercury is the chief remedy to be either given to the nurſe or the child.

The former is more uncertain, and will alſo ſeldom be ſubmitted to; the latter, therefore, is preferred.

To be given in two forms of calomel, or Van Sweeten's ſolution; as,

℞ Calomel, gr. i.
Sacchar. alb. gr. ij. m. ft. Pulv. *Powder a doſe, and to be repeated every night for eight nights; then the ſame doſe, every other night, for twelve nights.*

℞ Solut. corroſiv. ſublimat.
Ut in p. 156. *Thirty drops a doſe every night in milk.*

℞ Liquoris Hydrargyr.
Muriat. ut in p. 196, 3ſſ.
Decoct. Sarſæ, ut in vol. II. p. 426, lb. i. m. *A table-ſpoonful every night.*

King's Evil.

Scrofula is very various in its appearance, and extended in its ſeat. Its primary ſymptom is the ſwelling of the lymphatic glands, ending in ulceration: this ulceration extends it to other parts; and, in its progreſs, the whole of the ſyſtem appears to take on the morbid ſtate.

The treatment directed in vol. I. p. 337; and in vol. II. pp. 429 and 435; alſo,

℞ Ammon preparat. ʒij.
Rad. Gentian. Inciſ. ℈i.
Affunde Spt. Vin. Gallic. ʒxij. ft. tinct.

A tea-cupful in a glaſs of water, three or four times a day.

℞ Æthiop. Mineral.
Vegetab. ā ʒij.
Milleped. preparat.
Spong. uſt.
Sulphur. precipitat. ʒiij.
Conſerv. Lujulæ, ʒvi.
Syr. Altheæ, q. ſ. ut fiat elect.

The ſize of a nutmeg night and morning.

The local treatment detailed in p. 199 and 211; alſo,

℞ Ungt. Altheæ,
Fel Bovin. recent.
Sapon. Venet. ā ʒiij.
Petrolei, ʒij.
Sal Cornu Cervi volat. ʒſſ.
Camphor. ʒi. m. et trit. bene, ut ft. Ungt.

A ſmall quantity to be frequently rubbed in on the ſwelling.

℞ Camphoræ, ʒi.
Spt. Sal volat. Ammon. ʒiij.
Ol. Olivæ, ʒſſ. m. ut ft. Ungt.

℞ Scillæ Recent. in
Pulp. redact. ʒi.
Alkali Cauſtic. ʒi.
Exprime per Linteum, et miſce cum Mellis
Ungt. Baſilicon. ā ʒi. ut ft. Ungt.

℞ Emplaſt. Galban. ʒi.
Camphor. ʒi.
Petrolei, ʒij.
Sal Volat. C. C. ʒſſ. m. ut ft. Emplaſt.

Watery Head.

Hydrocephalus, or the watery-head, is a diſeaſe peculiar to infancy. It is of two kinds; the external and internal. The former is generally coeval with birth, or precedes it: the latter, however, is moſt frequent in its occurrence, and generally fatal in its termination.

External.

Treatment, the frequent application of bliſters along the courſe of the ſinus, and afterwards keeping up a diſcharge.

Internal.

This diſeaſe is diſtinguiſhed by pain of head acroſs the brow, accompanied with nauſea, ſickneſs, and other diſorders of the animal functions, without any evident cauſe, and ſudden in their attack; variable ſtate of pulſe; conſtant ſlow fever; and, in the advanced ſtage of the diſeaſe, dilatation of the pupil of the eye, with a tendency to a comatoſe ſtate.

Treatment detailed in vol. I. p. 333, and it depends on bleeding, bliſtering, and iſſues, in early ſtage.

In the more advanced, on mercury and diuretics.

The mercury is to be uſed in liberal doſes, in the form of calomel, or by unction.

The diuretics preferred are, the digitalis and doronicum Germanicum.

The effects of the diſeaſe are to be obviated by the uſe of tonics, as in vol. I. p. 299.

Meſenteric Fever.

Meſenteric fever is moſt common in its attacks from the age of three or four years. It is irregular in its paroxyſms, occaſionally remitting, and at other times entirely intermitting. It is attended with loſs of appetite, ſwelled belly, pain of bowels, daily attacking and alternating with periods of eaſe, and ſome days it is entirely abſent. The child ſenſibly falls off; it cannot walk, if formerly able to do it; and inclines to lie much in one poſture, from the languor and debility induced; a general flaccidity and paleneſs of countenance is conſpicuous; and, in the

progreſs of the diſeaſe, the meſenteric affection becomes viſible, by the increaſed ſize of belly, its hardneſs, and pain.

Treatment regulated by the ſtage of the diſeaſe.

Firſt ſtage treated by clearing the bowels, followed, alternately, by the uſe of calomel and neutral ſalts, on ſucceſſive days; and this plan regularly continued till a remiſſion takes place.

Second ſtage treated by mercurial friction to the abdomen, and the external remedies enumerated vol. II. p. 446.

Internally, narcotics and neutral ſalts ſhould be exhibited; as,

℞ Decoct. Cicut. ℥viij.
Sal Natron. ʒi. m. *A tea-ſpoonful three or four times a day.*

On a remiſſion taking place, tonics then indicated, as in vol. I. p. 299.

Hectic Fever

Muſt be regulated in its treatment by the primary diſeaſe, of which it is a conſequence.

Rickets

Conſiſt in an enlargement of the head anteriorly, and in a ſwelling of the joints, flattened ribs, protuberant belly, and general emaciation, with a bloated or florid countenance.

Treatment, as detailed in p. 165; alſo,

℞ Hydrarg. è Sulphur.
Pulv. Rhæi, ā gr. v.
Aromat. gr. ij. m. ft. Pulv. *To be given thrice a week.*

℞ Tinct. Ferri muriat. ℥ſſ. *Five to 20 drops a doſe, in a glaſs of bark decoction, twice a day.*

℞ Ferri Ammoniac. gr. ij. *A doſe every night.*

External treatment, as directed in p. 280; alſo,

℞ Ol. Palmæ, ℥ij.
Balſam. Peruv.
Ol. Nuc. Moſchat. ā ʒi.
Spt. Ammon. ʒij. Succin. ā gutt. xi. m. *With which the parts affected are to be anointed.*

Difficulty of Urine.

This affection is marked by pain in the discharge of urine, a frequent desire to avoid it, or with pain on the first attempt. The urine itself displays also a morbid state, being either mixed with a thick mucus, or tinged with blood; or it shows small coagula, intermixed with the discharge, that fall to the bottom.

The treatment consists first in the use of diluents and emollients, to remove irritation, as in vol. I. p. 286.

When inflammatory stage past cure, to be completed as in chronic nephritis, ditto.

When the disease is recurrent, the virga aurea is specific.

Suppression of Urine.

Suppression of urine, from impeded secretion, is known to occur, though a rare disease, in infancy; and the want of accumulation, or pain in the lower part of the belly, marks it from this cause.

To be treated by obviating inflammation by leeches to the abdomen.

Blisters to the sacrum, the warm bath, and the occasional use of laxatives and diuretics, vol. I. p. 332, proper.

Calculus.

The stone is a disease particularly common to infancy, more so even than to adults. In the form of gravel, the symptoms are generally slight, and yield to some gentle emollient laxative, to dilution, or some mild alkali.

Symptoms of irritation from stone to be alleviated by dilution, some emollient laxative as in vol. I. p. 286, and the use of a mild alkali, as in p. 240.

Occasional fits of pain will yield to the warm-bath and an opiate. *Vide* vol. I. p. 305.

Incontinence of Urine.

This is ſeldom, in infancy, a primary diſeaſe, but a conſequence of ſome other, as an affection of the bladder or ſpine. It is at times attended with violent gonorrhœa.

Acute ſpecies treated by bliſters to the ſacrum, tincture of cantharides in ſome ſoft emulſion, or aſtringents.

Exceſſive Thirſt

Is attended with a diſcharge of urine equal to the exceſs of fluid drank; and the urine is of the ſame pale watery appearance as when the fluid is received.

The treatment uncertain. The uſe of tonics has been propoſed, and opening the ſecretions of the ſkin or kidneys.

Inflamed Eyes.

Children, at birth, are very ſubject to ophthalmia, which varies in its degree, obſtinacy, and extent. From the appearance of the diſcharge, three ſpecies of it are noticed, viz. the bloodſhot, watery, and purulent.

The firſt is treated by an aſtringent waſh, as in vol. II. p. 413, and an additional covering to the head.

The ſecond by the common means of obviating inflammation, and the uſe of collyria, as in vol. I. p. 280. And

The third by the ſame means employed in the moſt active manner from the higher inflammation preſent.

Film, or Speck.

This diſeaſe has been treated at large elſewhere (vol. II. p. 189). In children, as in adults, it is moſt frequent in a ſcrofulous conſtitution; and ariſes as a conſequence of effuſion during the progreſs of inflammation.

To be treated by ſtimulants cautiouſly employed, as the aqua cupri ammon. the corroſive ſolution, or nitrated ointment.

Cataract.

Cataract and gutta ſerena are not infant diſeaſes; they may, however, occur, under peculiar circumſtances, as congenite diſorders, and their conſideration is therefore neceſſary here.

The treatment depends chiefly, at this period, on ſtimulating applications, as the uſe of a bruſh, or exciting inflammation by diluted æther, the corroſive ſolution, diluted oil of amber, ſteams of turpentine, &c.

Stye.

To be treated, when ſuppuration takes place, by touching its baſe with cauſtic, or applying a ligature.

Deafneſs.

Deafneſs from cold yields to additional warmth to the part, and the uſe of laxatives.

Deafneſs from induration removed by ſyringing the ears; uſing afterwards emollients, as in vol. II. p. 440; or ſtimulants, as,

℞ Ol. Amygdal. ℥ſſ.
Ol. Succin. rectificat. gutt. xx.
Spt. Camphorat. ʒ ſſ.
Tinct. Caſtor. ʒi. m.

Four or ſix drops to be dropped into the ear warm, morning and evening.

Deafneſs from dryneſs of ear removed either by an artificial ſupply, as the uſe of ſoap liniment or oil of almonds and æther, or by reſtoring the natural ſupply by onion juice inſerted into the ear, by a clove of garlic, and covering it by adheſive plaſter from the air; or by a bliſter behind the ear, or by electricity.

Canker.

Canker of the mouth conſiſts in ſmall ſores affecting the mouth, the inſide of the lips, or the gums. It occurs at three periods:

either after birth, when it forms a ſpecies of aphthæ (as in p. 39); or during the time of teething, when it ariſes from the irritation of the protruding teeth; or at the age of ſix or ſeven years, when the firſt ſet of teeth are changing; and it is at this time the worſt ſpecies of the diſeaſe appears, the whole gum diſſolving into foul ſores. It is conſidered as prevailing in ſome countries more than in others. It is a trifling complaint, unleſs when combined with poverty and improper nutriment.

The treatment conſiſts in the uſe of local aſtringents (firſt removing any ſtumps or carious teeth, if they appear the ſource of irritation); as,

℞ Bol. Armen.
G. Myrrh.
C. P. C.
Crem. Tartar. ā ʒi.
Mel. Roſar. q. ſ. ut ft. paſt. — *With a little of which the gums are to be frequently touched.*

℞ Aq. Calcis, ℥vij.
Tinct. Myrrh.
Mel. Roſæ, ā ʒſſ. m. — *Waſh to be frequently uſed.*

When theſe means fail, ſolutions of alum and diluted muriatic acid are to be employed, and their ſucceſs aſſiſted by the internal exhibition of the bark, ſarſa, and mineral acids.

Gangrene of the Cheek.

This diſeaſe is preceded by the appearance of a black ſpot on the cheek or lip, uſhered in with ſome degree of rigor or cold fit. This ſpot ſpreads faſt, and the parts diſſolve into ulceration without apparent marks of inflammation.

To be treated by the moſt powerful antiſeptics internally, as in p. 229. Alſo,

℞ Infuſ. Roſar. rubr. ℥iv.
Acid. muriat. gutt. viij. m. — *A ſpoonful often.*

External applications of the ſame kind; as,

℞ Infuſ. Chamomel. ℥vi.
Acid. muriat. gutt. xij. m. — *With which the ſore is to be frequently waſhed.*

℞ Infuſ. Salviæ, cum
Acid. muriat.

℞ Mel. Roſæ, ʒi.
Acid. muriat. gutt. iv. m. *Liniment for the ſore.*

℞ Cataplaſm. Dauci.

The primæ viæ to be kept open by laxatives, as in p. 227.

Swelling of Breaſts.

To be paillated, till puberty, by the uſe of emollients, as in vol. II. p. 415.

White Swelling.

Treated as in vol. II. p. 436.

Curved Spine and Palſy.

The ſeat of this injury varies, being either the neck, back, or upper part of the loins. Its firſt ſymptoms in children are irregular twitchings in the muſcles of the thighs, ſucceeded by diſlike to motion. An incapacity to move next takes place; along with it the extremities loſe much of their ſenſibility. This incapacity prevails in various degrees; but the uſe of the extremities, in time, comes to be totally loſt, and a remarkable rigidity of the ankles is at the ſame time conſpicuous.

To be treated by the formation of a drain or iſſue, as directed in vol. II. p. 452, on each ſide the ſeat of the injury, giving ſupport to the parts above by machinery, and employing tonics at the ſame time to forward their ſucceſs.

Simple Debility of Lower Extremities.

This is a complaint not very frequent. It is the effect of preceding diſeaſe, but it ſhows no marks, during its continuance, of being complicated with any other affection. The only ſymptom is the *debility itſelf*, gradually increaſing, till, in four or five weeks from its commencement, the uſe of the limbs is entirely loſt.

To be treated by blisters and caustics to the sacrum, by stimulant applications to the legs and thighs, as in vol. I. p. 289; and by the use of irons, to give support till the strength of the is restored.

Debility, with Discolouration.

This differs from the former in being, apparently, a general affection of the system. The children become weakly, and drag their legs after them; the head enlarges, the limbs become emaciated, and over the whole there appears a deep leaden blue colour.

To be treated by cordials and tonics internally, and externally by warm sea-bathing, friction, and stimulants.

Curvature of Bones, with Injury.

To be treated as in vol. II. p. 452.

Whitlow.

To be treated as in vol. II. p. 432; also,

℞ Ungt. Altheæ, ℥ij.
Spt. Vin. Camphorat. ʒij.
Opii, gr. vi. m. ft. Liniment.

℞ Camphoræ, ʒi.
Ol. Palinæ, ℥viij. m. ft. Liniment.

Boil.

To be treated as phlegmon, vol. II. p. 430.

Chilblains.

To be treated as in vol. II. p. 433; also,

℞ Ol. Palmæ, ʒi.
Macis, ℥ss.
Camphoræ, ʒij. m. ft. Liniment. *To be used night and morning.*

Burns.

To be treated as in vol. II. p. 420.

External Injuries of Bones.

These consist of luxations and fractures; and the rules for their treatment are the same as in the adult, detailed in vol. II. pp. 450 and 451.

Morbid Adhesion of Tongue.

To be treated by the operation.

Swallowing of tongue to be attended to; and, on restoring it to its place, the hæmorrhage, if considerable, to be stopped by Petit's instrument.

Hiccough

Forms a mild species of convulsion, to which infancy and childhood are much subjected.

In infancy, to be treated by correcting predominant acidity, and by absorbents, as in p. 226.

In childhood, by counteracting irritability, by the use of vinegar or the citric acid, or any powerful stimulus, suspending the feeling for a time.

Bleeding at the Nose.

To be treated as in vol. I. p. 294.

Affections of Navel.

Hæmorrhage.

Bleeding, or a rawness, is apt to arise on the separation of the cord. It is the effect of a soft fungus, preventing the skin stretching, as usual, over the mouths of the vessels.

To be treated by compression, with lint secured by sticking, plaster, or a bandage; and, if necessary, the use of external styptics conjoined.

Ulceration.

To be treated by a ſinged rag, the application of abſorbents, a cabbage-leaf or toaſted raiſin, or, failing theſe, a gentle uſe of cauſtic.

Where more extenſive, and of a gangrenous nature, to be treated by antiſeptics, as in p. 229.

Imperfect Separation of Cord.

To be treated by the application of a new ligature, ſo as to enable it completely to ſhrink.

Swelling of Prepuce.

Yields to fomentations and ſcarification.

Falling-down of Gut.

To be treated by aſtringent lotions, after reducing it; and even injections of the ſame nature into the anus.

Where much inflammation, a ſaturnine injection, with laudanum, firſt made, before attempting the reduction.

Diſcharge from the Vagina.

The nature of theſe diſcharges, preceding puberty, is various, being either bloody, mucous, or purulent.

To be treated by ſaturnine lotion, as in vol. II. p. 413; and, where obſtinate, by a ſlight uſe of mercury, in the form of the corroſive ſublimate, or the bark, and ſome of the balſams, as in vol. I. p. 286.

Contaminated Wounds.

To be treated as in vol. II. p. 421.

Congenite Diſeaſes.

Deranged Circulation.

The ſymptoms of this affection are, a diſcolouration of the face and neck, with a dark blue or leaden colour of the lips. The period of their appearance is ſoon after birth; and they continue to increaſe, attended with difficult reſpiration on motion; neither are the ſymptoms relieved by any means employed but confinement to one poſture.

Nothing, in the way of treatment, can be attempted.

Deficiency of Cranium.

Hernia of the Brain.

It is chiefly by want of fluctuation, by the effect of preſſure, and by its pulſation, that it is diſtinguiſhed from other tumors in this ſituation.

To be treated by a gradual compreſſion, made by a thin piece of lead appended to the child's cap.

External Tumors.

The partial kind is one conſpicuous at birth, on the cranium, reſembling in ſize an egg, and of a round form, with the ſkin diſcoloured.

Treatment, the uſe of aſtringents; as, fomentations of red wine or diluted brandy; compreſſion, by means of a piece of thin lead; puncture, where the contents are daily augmenting.

The general ſpecies of external tumor yields to time and the uſe of warm aſtringent embrocations; as, a ſolution of vinegar, ſal-ammoniac, or camphorated ſpirits.

Spina Biſida

Admits of no cure; even preſſure is hardly admiſſible.

Parenchymatous Tumors.

Yield to aſtringents, to preſſure, or extirpation.

Hernias.

The umbilical treated by compreſſion, by means of ſticking-plaſter, or a bandage.

The inguinal generally yields to cold bathing; and, when more advanced, to a truſs.

Hydrocele

Yields readily to the uſe of external aſtringents.

Imperfection of Parts.

Imperforation of Vagina.

To be treated as in vol. IV. p. 13.

Of Anus.

To be treated as in Surgery.

Of Penis.

To be treated as in Surgery.

Of Lips.

To be treated as in vol. II. p. 218.

Of Ears.

To be treated as in vol. II. p. 217.

Of Eyes.

To be treated, where the defect conſiſts in ſquinting, by drawing the diſtorted eye in a right direction, by directing its action that way.

Of Feet.

To be treated as in vol. II. p. 235.

Orpinal Marks.

To be treated, where capable of relief, as deſcribed in vol. II. p. 207.

A

VIEW OF NOSOLOGY;

OR,

THE ARRANGEMENT AND CLASSIFICATION

OF

DISEASES:

EXHIBITING

THE SYSTEMS OF DIFFERENT AUTHORS,

To the present Time;

AND CONNECTING THE MOST APPROVED,

VIZ.

THE LATE DR. CULLEN'S,

WITH THE PRECEDING VOLUMES.

NOSOLOGY.

I. WE have now conſidered the practice of medicine and ſurgery in their full extent; but, to render the view complete, it may be ſtill neceſſary to connect the account of the diſeaſes exhibited in this and the preceding volumes with a ſyſtem of Noſology; a ſubject ſo eſſentially neceſſary for every practitioner, in order to excel in the diſcrimination of diſeaſe.

II. Noſology is properly that ſtudy or ſcience, which, embracing ſolely the pathagnomonics, or diſtinguiſhing ſymptoms of diſeaſe, aſcertains, by this means, their nature and character.

III. Every diſeaſe, as it appears in nature, forms a diſtinct ſpecies, or has a greater or leſſer ſet of ſym-

ptoms entirely peculiar to itſelf; and a certain number, alſo, in which it agrees with ſome other diſeaſes. Hence ariſes a diſtinction in the ſymptoms of diſeaſe. By the latter its relation is eſtabliſhed to other diſeaſes; and, by the former, its morbid appearances, or phænomena, are confined to itſelf. It is this diſtinction, therefore, which, in the progreſs of the ſtudy of Noſology, has cauſed genera to be formed out of the ſpecies, or out of diſeaſes, as they naturally appear.

IV. In forming genera, however, much accuracy of obſervation is neceſſary, ſo as not to curtail the ſpecies too much, on the one hand, or load the memory by imperfect obſervation on the other. Hence, in the ſpecies, no diſtinction ſhould be made where the train of ſymptoms varies only in degree, or is modified ſomewhat by ſtate of conſtitution, or ſome ſlight variation in the action of the ſame cauſe.

V. Two circumſtances particularly evince the relation of diſeaſes to each other.

The firſt is, the ſimilitude of their cauſe, which always infers a ſimilitude of action. This is ſtrongly apparent in all contagious diſeaſes.

The ſecond circumſtance is, the accordance in the

ſucceſs of their treatment; for diſeaſes, cured by the ſame means, infallibly partake of the ſame nature.

VI. In marking the characters of diſeaſes, or forming Noſology, the rules to be eſtabliſhed are:

1. To ſelect thoſe external marks only which are obvious to the ſenſes, rejecting all conjecture beyond this obvious appearance, or laying aſide any conſideration of the internal ſtate; and theſe obvious marks are what ſtrike the phyſician more than what regulate, or are drawn from, the feelings of the patient.

2. That theſe obvious, or external marks, be the conſtant attendants of the diſeaſe, either on its firſt attack or its progreſs. The cauſe, therefore, of the diſeaſe, where apparent, is not to be rejected, nor the progreſſive ſucceſſion of its phænomena.

3. That no more of theſe external marks, or ſymptoms, be taken, than what are ſufficient to characteriſe the diſeaſe. And,

4. That the ſtate or defect of the functions be noted, as affording a leading concluſion to the character of many diſeaſes.

VII. Having eſtabliſhed the proper mode of defining diſeaſes by theſe rules, this definition ſhould be expreſſed in the moſt common, or generally-adopted

terms; and where any alteration in this reſpect is employed, ſynonymes, as explanatory of it, ſhould always be joined.

VIII. With theſe obſervations on the principles of Noſology in view, we ſhall now exhibit an abſtract of the leading ſyſtems of it that have appeared, finiſhing with that of Dr. Cullen, as beſt ſuited to the purpoſes of the practical phyſician.

SYNOPTICAL VIEW

OF THE

SYSTEM OF SAUVAGES.

THE firſt Syſtem of Noſology that appeared was that of the celebrated Sauvages in 1732: previous to his time, the hint of ſuch a work had been ſtrongly thrown out by Sydenham and Baglivi; and, even before this, ſome rude attempt had been made towards it by Plater.

The Syſtem of Sauvages is arranged into ten claſſes; theſe claſſes are divided into different orders; and theſe orders into different genera, compoſed of their ſeveral ſpecies—thus:

Class I. VITIA.

Order I. *MACULÆ.*

Genus 1. Leucoma.
2. Vitiligo.
3. Ephelis.
4. Gutta roſea.
5. Nævus.
6. Ecchymoma.

Ord. II. *EFFLORESCENTIÆ.*

7. Herpes.
8. Epinyctis.
9. Pſydracia.
10. Hidroa.

Ord. III. *PHYMATA.*

11. Erythema.
12. Œdema.
13. Emphyſema.
14. Schirrus.
15. Phlegmone.
16. Bubo.
17. Parotis.
18. Furunculus.
19. Anthrax.
20. Cancer.
21. Paronychia.
22. Phimoſis.

ORD. IV. *EXCRESCENTIÆ.*

23. Sarcoma.
24. Condyloma.
25. Verruca.
26. Pterygium.
27. Hordeolum.
28. Bronchocele.
29. Exoſtoſis.
30. Gibboſitas.
31. Lordoſis.

ORD. V. *CYSTIDES.*

32. Aneuryſma.
33. Varix.
34. Hydatis.
35. Mariſca.
36. Staphyloma.
37. Lupia.
38. Hydarthrus.
39. Apoſtema.
40. Exomphalus.
41. Oſcheocele.

ORD. VI. *ECTOPIÆ.*

42. Exophthalmia.
43. Blepharoptoſis.
44. Hypoſtophyle.
45. Paragloſſa.
46. Proptoma.
47. Exania.
48. Exocyſte.
49. Hyſteroptoſis.
50. Enterocele.
51. Epiplocele.
52. Gaſterocele.
53. Hepatocele?
54. Splenocele.
55. Hyſterocele.
56. Cyſtocele.
57. Encephalocele.
58. Hyſteroloxia.
59. Parorchydium.
60. Exarthrema.
61. Diaſtaſis.
62. Laxarthrus.

ORD. VII. *PLAGÆ.*

63. Vulnus.
64. Punctura.
65. Excoriatio.
66. Contuſio.
67. Fractura.
68. Fiſſura.
69. Ruptura.
70. Amputatura.
71. Ulcus.
72. Exulceratio.
73. Sinus.
74. Fiſtula.
75. Rhagas.
76. Eſchara.
77. Caries.
78. Arthrocace.

CLASS II. FEBRES.

ORD. I. *CONTINUÆ.*

79. Ephemera.
80. Synocha.
81. Synochus.
82. Typhus.
83. Hectica.

ORD. II. *REMITTENTES.*

84. Amphimerina.
85. Tritæophya.
86. Tetartophya.

ORD. III. *INTERMITTENTES.*

87. Quotidiana.
88. Tertiana.
89. Quartana.
90. Erratica.

CLASS III. PHLEGMASIÆ.

ORD. I. *EXANTHEMATICÆ.*

91. Peſtis.
92. Variola.
93. Pemphigus.
94. Rubeola.
95. Miliaris.
96. Purpura.
97. Eryſipelas.
98. Scarlatina.
99. Eſſera.
100. Aphtha.

ORD. II. *MEMBRANACEÆ.*

101. Phrenitis.
102. Paraphreneſis.
103. Pleuritis.
104. Gaſtritis.
105. Enteritis.
106. Epiploitis.
107. Metritis.
108. Cyſtitis.

ORD. III. *PARENCHYMATOSÆ.*

109. Cephalitis.
110. Cynanche.
111. Carditis.
112. Peripneumonia.
113. Hepatitis.
114. Splenitis.
115. Nephritis.

CLASS IV. SPASMI.

ORD. I. *TONICI PARTIALES.*

116. Strabiſmus.
117. Triſmus.
118. Obſtipitas.
119. Contractura.
120. Crampus.
121. Priapiſmus.

ORD. II. *TONICI GENERALES.*

122. Tetanus.
123. Catochus.

ORD. III. *CLONICI PARTIALES.*

124. Nyſtagmus.
125. Carphologia.
126. Pandiculatio.
127. Apomyttoſis.
128. Convulſio.
129. Tremor.
130. Palpitatio.
131. Claudicatio.

ORD. IV. *CLONICI GENERALES.*

132. Rigor.
133. Eclampſia.
134. Epilepſia.
135. Hyſteria.
136. Scelotyrbe.
137. Beriberia.

CLASS V. ANHELATIONES.

ORD. I. *SPASMODICÆ.*

138. Ephialtes.
139. Sternutatio.
140. Oſcedo.
141. Singultus.
142. Tuſſis.

ORD. II. *OPPRESSIVÆ.*

143. Stertor.
144. Dyſpnœa.
145. Aſthma.
146. Orthopnœa.
147. Angina.
148. Pleurodyne.
149. Rheuma.
150. Hydrothorax.
151. Empyema.

CLASS VI. DEBILITATES.

ORD. I. *DYSÆSTHESIÆ.*

152. Cataracta.
153. Caligo.
154. Amblyopia.
155. Amauroſis.
156. Anoſmia.
157. Agheuſtia.
158. Dyſecæa.
159. Paracuſis.
160. Cophoſis.
161. Anæſtheſia.

ORD. II. *ANEPITHYMIÆ.*

162. Anorexia.
163. Adipsia.
164. Anaphrodisia.

ORD. III. *DYSCINESIÆ.*

165. Mutitas.
166. Aphonia.
167. Psellismus.
168. Paraphonia.
169. Paralysis.
170. Hemiplegia.
171. Paraplexia.

ORD. IV. *LEIPOPSYCHIÆ.*

172. Asthenia.
173. Leipothymia.
174. Syncope.
175. Asphyxia.

ORD. V. *COMATA.*

176. Catalepsis.
177. Ecstasis.
178. Typhomania.
179. Lethargus.
180. Cataphora.
181. Carus.
182. Apoplexia.

CLASS VII. DOLORES.

ORD. I. *VAGI.*

183. Arthritis.
184. Ostocopus.
185. Rheumatismus
186. Catarrhus.
187. Anxietas.
188. Lassitudo.
189. Stupor.
190. Pruritus.
191. Algor.
192. Ardor.

ORD. II. *CAPITIS.*

193. Cephalalgia.
194. Cephalæa.
195. Hemicrania.
196. Ophthalmia.
197. Otalgia.
198. Odontalgia.

ORD. III. *PECTORIS.*

199. Dysphagia.
200. Pytosis.
201. Cardiogmus.

ORD. IV. *ABDOMINALES INTERNI.*

202. Cardialgia.
203. Gastrodynia.
204. Colica.
205. Hepatalgia.
206. Splenalgia.
207. Nephralgia.
208. Dystocia.
209. Hysteralgia.

ORD. V. *EXTERNI ET ARTUUM.*

210. Mastodynia.
211. Rachialgia.
212. Lumbago.
213. Ischias.
214. Proctalgia.
215. Pudendagra.

CLASS VIII. VESANIÆ.

ORD. I. *HALLUCINATIONES.*

216. Vertigo.
217. Suffusio.
218. Diplopia.
219. Syrogmos.
220. Hypochondriasis.
221. Somnambulismus.

ORD. II. *MOROSITATES.*

222. Pica.
223. Bulimia.
224. Polydipsia.
225. Antipathis.
226. Nostalgia.
227. Panophobia.
228. Satyriasis.
229. Nymphomania.
230. Tarantismus.
231. Hydrophobia.

ORD. III. *DELIRIA.*

232. Paraphrosyne.
233. Amentia.
234. Melancholia.
235. Mania.
236. Demonomania.

ORD. IV. *VERANIÆ ANOMALÆ.*

237. Amnesia.
238. Agrypnia.

CLASS IX. FLUXUS.

ORD. I. *SANGUIFLUXUS.*

239. Hæmorrhagia.
240. Hæmoptyſis.
241. Stomacace.
242. Hæmatemeſis.
243. Hæmaturia.
244. Menorrhagia.
245. Abortus.

ORD. II. *ALVIFLUXUS.*

246. Hepatirrhœa.
247. Hæmorrhois.
248. Dyſenteria.
249. Melæna.
250. Nauſea.
251. Vomitus.
252. Ileus.
253. Cholera.
254. Diarrhœa.
255. Cœliaca.
256. Lienteria.
257. Teneſmus.

ORD. III. *SERIFLUXUS.*

258. Ephidroſis.
259. Epiphora.
260. Coryza.
261. Ptyaliſmus.
262. Anacatharſis.
263. Diabetes.
264. Enureſis.
265. Dyſuria.
266. Pyuria.
267. Leucorrhœa.
268. Gonorrhœa.
269. Dyſpermatiſmus.
270. Galactirrhœa.
271. Octorrhœa.

ORD. IV. *ÆRIFLUXUS.*

272. Flatulents.
273. Ædopſophia.
274. Dyſodia.

CLASS X. CACHEXIÆ.

ORD. I. *MACIES.*

275. Tabes.
276. Phthiſis.
277. Atrophia.
278. Aridura.

ORD. II. *INTUMESCENTIÆ.*

279. Polyſarcia.
280. Pneumatoſis.
281. Anaſarca.
282. Phlegmatia.
283. Phyſconia.
284 Graviditas.

ORD. III. *HYDROPES PARTIALES.*

285. Hydrocephalus.
286. Phyſocephalus.
287. Hydrorachitis.
288. Aſcites.
289. Hydrometra.
290. Phyſometra.
291. Tympanites.
292. Metroriſmus.
293. Iſchuria.

ORD. IV. *TUBERA.*

294. Rachitis.
295. Scrofula.
296. Carcinoma.
297. Leontiaſis.
298. Malis.
299. Framboeſia.

ORD. V. *IMPETIGINES.*

300. Syphilis.
301. Scorbutus.
302. Elephantiaſis.
303. Lepra.
304. Scabies.
305. Tinea.

ORD. VI. *ICTERITIÆ.*

306. Aurigo.
307. Melaſicterus.
308. Phænigmus.
309. Chloroſis.

ORD. VII. *CACHEXIÆ ANOMALÆ.*

310. Phthiriaſis.
311. Trichoma.
312. Alopecia.
313. Elcoſis.
314. Gangræna.
315. Necroſia.

SYNOPTICAL VIEW

OF THE

SYSTEM OF LINNÆUS.

NEXT to the ſyſtem of Sauvages comes that of the celebrated Linnæus, who, after a new creation of knowledge on the ſubject of Botany, applied the ſame plan of arrangement to the elucidation of the nature of diſeaſe.—His ſyſtem is divided into Eleven Claſſes, and is rather more extended than that of Sauvages, whom he however cloſely follows; but Linnæus we find not ſo happy in his Arrangement of Diſeaſes as in his Syſtema Naturæ.

Class I. EXANTHEMATICA.

Ord. I. *CONTAGIOSI.*

1. Morta.
2. Peſtis.
3. Variola.
4. Rubeola.
5. Petechia.
6. Syphilis.

Ord. II. *SPORADICI.*

7. Miliaria.
8. Uredo.
9. Aphtha.

Ord. III. *SOLITARII.*

10. Eryſipelas.

CLASS II. CRITICI.

ORD. I. *CONTINENTES.*

11. Diaria.
12. Synocha.
13. Synochus.
14. Lenta.

ORD. II. *INTERMITTENTES.*

15. Quotidiana.
16. Tertiana.
17. Quartana.
18. Duplicana.
19. Errana.

ORD. III. *EXACERBANTES.*

20. Amphimerina.
21. Tritæus.
22. Tetartophia.
23. Hermitritæa.
24. Hectica.

CLASS III. PHLOGISTICI.

ORD. I. *MEMBRANACEI.*

25. Phrenitis.
26. Paraphrenesis.
27. Pleuritis.
28. Gastritis.
29. Enteritis.
30. Proctitis.
31. Cystitis.

ORD. II. *PARENCHYMATICI.*

32. Sphacelismus.
33. Cynanche.
34. Peripnuemonia.
35. Hepatitis.
36. Splenitis.
37. Nephritis.
38. Hysteritis.

ORD. III. *MUCSULOSI.*

39. Phlegmone.

CLASS IV. DOLOROSI.

ORD. I. *INTRINSECI.*

40. Cephalalgia.
41. Hemicrania.
42. Gravedo.
43. Ophthalmia.
44. Otalgia.
45. Odontalgia.
46. Angina.
47. Soda.
48. Cardialgia.
49. Gaſtrica.
50. Colica.
51. Hepatica.
32. Splenica.
53. Pleuritica.
54. Pneumonica.
55. Hyſteralgia.
56. Nephritica.
57. Dyſuria.
58. Pudendagra.
59. Proctica.

ORD. II. *EXTRINSECI.*

60. Arthritis.
61. Oſtocopus.
62. Rheumatiſmus.
63. Volatica.
64. Pruritus.

CLASS V. MENTALES.

ORD. I. *IDEALES.*

65. Delirium.
66. Paraphroſyne.
67. Amentia.
68. Mania.
69. Dæmonia.
70. Veſania.
71. Melancholia.

ORD. II. *IMAGINARII.*

72. Syringmos.
73. Phantaſmus.
74. Vertigo.
75. Panophobia.
76. Hypochondriaſis.
77. Somnambuliſmus.

ORD. III. *PATHETICI.*

78. Citta.
79. Bulimia.
80. Polydipsia.
81. Satyriasis.
82. Erotomania.
83. Nostalgia.
84. Tarantismus.
85. Rabies.
86. Hydrophobia.
87. Cacositia.
88. Antipathia.
89. Anxietas.

CLASS VI. QUIETALES.

ORD. I. *DEFECTIVI.*

90. Lassitudo.
91. Languor.
92. Asthenia.
93. Lipothymia.
94. Syncode.
95. Asphyxia.

ORD. II. *SOPOROSI.*

96. Somnolentia.
97. Typhomania.
98. Lethargus.
99. Cataphora.
100. Carus.
101. Apoplexia.
102. Paraplegia.
103. Hemiplegia.
104. Paralysis.
105. Stupor.

ORD. III. *PRIVATIVI.*

106. Morosis.
107. Oblivio.
108. Amblyopia.
109. Cataracta.
110. Amaurosis.
111. Scotomia.
112. Cophosis.
113. Anosmia.
114. Ageustia.
115. Aphonia.
116. Anorexia.
117. Adipsia.
118. Anæsthesia.
119. Atecnia.
120. Atonia.

CLASS VII. MOTORII.

ORD. I. *SPASTICI.*

121. Spaſmus.
122. Priapiſmus.
123. Borborygmos.
124. Triſmos.
125. Sardiaſis.
126. Hyſteria.
127. Tetanus.
128. Catochus.
129. Catalepſis.
130. Agrypnia.

ORD. II. *AGITATORII.*

131. Tremor.
132. Palpitatio.
133. Orgaſmus.
134. Subſultus.
135. Carpologia.
136. Stridor.
137. Hippos.
138. Pſelliſmus.
139. Chorea.
140. Beriberi.
141. Rigor.
142. Convulſio.
143. Epilepſia.
144. Hieranoſos.
145. Raphania.

CLASS VIII. SUPPRESSORII.

ORD. I. *SUFFOCATORII.*

146. Raucedo.
147. Vociferatio.
148. Riſus.
149. Fletus.
150. Suſpirium.
151. Oſcitatio.
152. Pandiculatio.
153. Singultus.
154. Sternutatio.
155. Tuſſis.
156. Stertor.
157. Anhelatio.
158. Suffocatio.
159. Empyema.
160. Dyſpnœa.
161. Aſthma.
162. Orthopnœa.
163. Ephialtes.

ORD. II. *CONSTRICTORII.*

164. Aglutitio.
165. Flatulentia.
166. Obſtipatio.
167. Iſchuria.
168. Dyſmenorrhœa.
169. Dyſlochia.
170. Aglactatio.
171. Sterilitas.

CLASS IX. EVACUTORII.

ORD. I. *CAPITIS.*

172. Otorrhœa.
173. Epiphora.
174. Hæmorrhagia.
175. Coryza.
176. Stomacace.
177. Ptyaliſmus.

ORD. II. *THORACIS.*

178. Screatus.
179. Expectoratio.
180. Hæmoptyſis.
181. Vomica.

ORD. III. *ABDOMINIS.*

182. Ructus.
183. Nauſea.
184. Vomitus.
185. Hæmatemeſis.
186. Iliaca.
187. Cholera.
188. Diarrhœa.
189. Lienteria.
190. Cœliaca.
191. Cholirica.
192. Dyſenteria.
193. Hæmorrhois.
194. Teneſmus.
195. Crepitus.

ORD. IV. *GENTIALIUM.*

196. Enureſis.
197. Stranguria.
198. Diabetes.
199. Hæmaturia.
200. Glus.
201. Gonorrhœa.
202. Leucorrhœa.
203. Menorrhagia.
204. Parturitio.
205. Abortus.
206. Mola.

ORD. V. *CORPORIS EXTERNI.*

207. Galactia.
208. Sudor.

CLASS X. DEFORMES.

ORD. I. *EMACIANTES.*

209. Phthisis.
210. Tabes.
211. Atrophia.
212. Marasmus.
213. Rachitis.

ORD. II. *TUMIDOSI.*

214. Polysarcia.
215. Leucophlegmatia.
216. Anasarca.
217. Hydrocephalus.
218. Ascites.
219. Hyposarca.
220. Tympanites.
221. Graviditas.

ORD. III. *DECOLORES.*

222. Cachexia.
223. Chlorosis.
224. Scorbutus.
225. Icterus.
226. Plethora.

CLASS XI. VITIA.

ORD. I. *HUMORALIA.*

227. Aridura.
228. Digitium.
229. Emphysema.
230. Œdema.
231. Sugillatio.
232. Inflammatio.
233. Abscessus.
234. Cangrena.
235. Shacelus.

ORD. II. *DIALYTICA.*

236. Fractura.
237 Luxatura.
238. Ruptura.
239. Contusura.
240. Profusio.
241. Vulnus.
242. Amputatura.
243. Lacertura.
244. Punctra.
245. Morsus.
246. Combustura.
247. Excortura.
248. Intertgo.
249. Rhaga

ORD. III. *EXULCERATIONES.*

250. Ulcus.
251. Cacoëthes.
252. Noma.
253. Carcinoma.
254. Ozena.
255. Fiſtula.
256. Caries.
257. Arthrocace.
258. Cocyta.
259. Paronychia.
260. Pernio.
261. Preſſura.
262. Arctura.

ORD. IV. *SCABIES.*

263. Lepra.
264. Tinea.
265. Achor.
266. Pſora.
267. Lippitudo.
268. Serpigo.
269 Herpes.
270. Varus.
271. Bacchía.
272. Bubo.
273. Anthrax.
274. Phlyctenæ.
275. Puſtula.
276. Papula.
277. Hordeolum.
278. Verruca.
279. Clavus.
280. Myrmecium.
281. Eſchara.

ORD. V. *TUMORES PROTUBERANTES.*

282. Aneuriſm.
283. Varix.
284. Schirrus.
285. Struma.
286. Atherom.
287. Anchyloſis.
288. Ganglion.
289. Natta.
290. Spinola.
291. Exoſtoſis.

ORD. VI. *PROCIDENTIÆ.*

292. Hernia
293. Prolapſus.
294. Condyloma.
295. Sarcoma.
296. Pterygium.
297. Ectropium.
298. Phimoſis.
299. Clitoriſmus.

ORD. VII. *DEFORMATIONES.*

300. Contractura.
301. Gibber.
302. Lordoſis.
303. Diſtortio.
304. Tortura.
305. Strabiſmus.
306. Lagophthalmia.
307. Nyctalopia.

308. Presbytia.
309. Myopia.
310. Labarium.
311. Lagostoma.
312. Apella.
313. Atreta.
314. Plica.
315. Hirsuties.
316. Alopecia.
317. Trichiasis.

ORD. VIII. *MACULÆ.*

311. Cicatrix.
319. Nævus.
320. Morphæa.
321. Vibex.
322. Sudamen.
323. Melasma.
324. Hepatizon.
325. Lentigo.
326. Ephelis.

SYNOPTICAL VIEW

OF THE

SYSTEM OF VOGEL.

AFTER the ſyſtem of Linnæus comes to be noticed that of Vogel, profeſſor at Göttingen. It comprehends, like that of Linnæus, no leſs than eleven claſſes.

Class I. FEBRES.

Ord. I. *INTERMITTENTES.*

1 Quotidiana
2 Tertiana
3 Quartana
4 Quintana
5 Sextana
6 Septana
7 Octana
8 Nonana
9 Decimana
10 Vaga
11 Menſtrua
12 Terriana duplex
13 Quartana duplex
14 Quartana triplex.

Ord. II. *CONTINUÆ.*

§ 1. SIMPLICES.

15 Quotidiana
16 Synochus
17 Amatoria
18 Phrenitis
19 Epiala
20 Cauſos
21 Elodes
22 Lethargus
23 Typhomania
24 Leipyria
25 Phricodes
26 Lyngodes
27 Aſſodes
28 Cholerica
29 Syncopalis
30 Hydrophobia
31 Oſcitans
32 Icſtericodes
33 Peſtilentialis
34 Siriaſis

§ 2. COMPOSITÆ.

¶ 1. *Exanthematicæ.*

35 Variolosa
36 Morbillosa
37 Miliaris
38 Petechialis
39 Scarlatina
40 Urtica
41 Bullosa
42 Varicella
43 Pemphingodes
44 Aphthosa.

¶ 2. *Inflammatoriæ.*

45 Phrenismus
46 Chemosis
47 Ophthalmites
48 Otites
49 Angina
50 Pleuritis
51 Peripneumonia
52 Mediastina
53 Pericarditis
54 Carditis
55 Paraphrenitis
56 Gastritis
57 Enteritis
58 Hepatitis
59 Splenitis
60 Mesenteritis
61 Omentitis
62 Peritonitis
63 Myocolitis
64 Pancreatica
65 Nephritis
66 Cystitis
67 Hysteritis
68 Erysipelacea
69 Podagrica
70 Panaritia
71 Cyssotis.

¶ 3. *Symptomaticæ.*

72 Apoplectica
73 Catarrhalis
74 Rheumatica
75 Hæmorrhoidalis
76 Lactea
77 Vulneraria
78 Suppuratoria
79 Lenta
80 Hectica.

CLASS II. PROFLUVIA.

ORD. I. *HÆMORRHAGIÆ.*

81 Hæmorrhagia
82 Epiſtaxis
83 Hæmoptoë
84 Hæmoptyſis
85 Stomacace
86 Odontirrhœa
87 Otorrhœa
88 Ophthalmorhagia
89 Hæmatemeſis
90 Hepatirrhœa
91 Catarrhexis
92 Hæmaturia
93 Cyſtirrhagia
94 Stymatoſis
95 Hæmatopedeſis
96 Menorrhagia
97 Abortio.

ORD. II. *APOCENOSES.*

98 Catarrhus
99 Epiphora
100 Coryza
101 Otopuoſis
102 Otoplatos
103 Ptyaliſmus
104 Vomica
105 Diarrhœa
106 Puorrhœa
107 Dyſenteria
108 Lienteria
109 Cœliaca
110 Cholera
111 Pituitaria
112 Leucorrhois
113 Eneureſis
114 Diureſis
115 Diabetes
116 Puoturia
117 Chylaria
118 Gonorrhœa
119 Leucorrhœa
120 Exoneiroſis
121 Hydropedeſis
122 Galactia
123 Hypercatharſis
124 Ecphyſe
125 Dyſodia.

CLASS III. EPISCHESES.

126 Gravedo
127 Flatulentia
128 Obſtipatio
129 Iſchuria
130 Amenorrhœa
131 Dyſlochia
132 Deuteria
133 Agalaxis.

CLASS IV. DOLORES.

134 Anxietas
135 Bleſtriſmus
136 Pruritus
137 Catapſyxis
138 Rheumatiſmus
139 Arthritis
140 Cephalalgia
141 Cephalæa
142 Clavus
143 Hemicrania
144 Carebaria
145 Odontalgia
146 Hæmodia
147 Odaxiſmus
148 Otalgia
149 Acatapoſis
150 Cionis
151 Himantoſis
152 Cardiogmus
153 Maſtodynia
154 Soda
155 Periadynia
156 Pneumatoſis
157 Cardialgia
158 Encauſis
159 Nauſea
160 Colica
161 Eilema
162 Ileus
163 Stranguria
164 Dyſuria
165 Lithiaſis
166 Teneſmus
167 Cluneſia
168 Cedma
169 Hyſteralgia
170 Dyſmenorrhœa
171 Dyſtocia
172 Atocia
173 Priapiſmus
174 Pſoriaſis
175 Podagra
176 Oſteocopus
177 Pſophos
178 Volatica
179 Epiphlogiſma.

CLASS V. SPASMI.

180 Tetanus
181 Opiſthotonus
182 Epiſthotonus
183 Catochus
184 Tremor
185 Frigus
186 Horror
187 Rigor
188 Epilepſia
189 Eclampſia
190 Hieranoſos
191 Convulſio
192 Raphania
193 Chorea

194 Crampus
195 Scelotyrbe
196 Angone
197 Gloſſocele
198 Gloſſocoma
199 Hippos
200 Illoſis
201 Cincleſis
202 Cataclaſis
203 Ciſſoſis
204 Sternutatio
205 Tuſſis
206 Clamor
207 Triſmus
208 Capiſtrum
209 Sardiaſis
210 Gelaſmus
211 Incubus
212 Singultus
213 Palpitatio
214 Vomitus
215 Ructus
216 Ruminatio
217 Œſophagiſmus
218 Hypochondriaſis
219 Hyſteria
220 Phlogoſis
221 Digitium.

Class VI. ADYNAMIÆ.

222 Laſſitudo
223 Aſthenia
224 Torpor
225 Adynamia
226 Paralyſis
227 Paraplegia
228 Hemiplegia
229 Apoplexia
230 Catalepſis
231 Carus
232 Coma
233 Somnolentia
234 Hypophaſis
235 Ptoſis
236 Amblyopia
237 Mydriaſis
238 Amauroſis
239 Cataracta
240 Synizezis
241 Glaucoma
242 Achlys
243 Nyctalopia
244 Hemeralopia
245 Hemalopia
246 Dyſicoia
247 Surditas
248 Anoſmia
249 Apogeuſis
250 Aſaphia
251 Clangor
252 Raucitas
253 Aphonia
254 Leptophonia
255 Oxyphonia
256 Rhenophonia
257 Mutitas
258 Traulotis
259 Pſellotis
260 Iſchnophonia
261 Battariſmus

262 Suſpirium
263 Oſcitatio
264 Pandiculatio
265 Apnœa
266 Macropnœa
267 Dyſpnœa
268 Aſthma
269 Orthopnœa
270 Pnigma
271 Renchus
272 Rhochmos
273 Lipothymia
274 Syncope
275 Aſphyxia
276 Apepſia
277 Dyſpepſia
278 Diaphthora
279 Anorexia
280 Anatrope
281 Adipſia
282 Acyiſis
283 Ageneſia
284 Anodynia.

CLASS VII. HYPERÆSTHESES.

285 Antipathia
286 Agrypnia
287 Phantaſma
288 Caligo
289 Hæmolopia
290 Marmaryge
291 Dyſopia
292 Suſurrus
293 Vertigo
294 Apogeuſia
295 Polydipſia
296 Bulimus
297 Addephagia
298 Cynorexia
299 Allotriophagia
300 Málacia
301 Pica
302 Bombus
303 Celſa.

CLASS VIII. CACHEXIÆ.

304 Cachexia
305 Chloroſis
306 Icterus
307 Melanchlorus
308 Atrophia
309 Tabes
310 Phthiſis
311 Hydrothorax
312 Rachitis
313 Anaſarca
314 Aſcites
315 Hydrocyſtis
316 Tympanites
317 Hyſterophyſe

318 Scorbutus
319 Syphilis
320 Lepra
321 Eléphantiaſis
322 Elephantia
323 Plica
324 Phthiriaſis
325 Phyſconia
326 Paracyiſis
327 Gangræna
328 Sphacelus.

CLASS IX. PARANOIÆ.

329 Athymia
330 Delirium
331 Mania
332 Melancholia
333 Ecſtaſis
334 Ecplexis
335 Enthuſiaſmus
336 Stupiditas
337 Amentia
338 Oblivio
339 Somnium
340 Hypnobataſis.

CLASS X. VITIA.

ORD. I. *INFLAMMATIONES.*

341 Ophthalmia
342 Blepharotis
343 Eryſipelas
344 Hieropyr
345 Paronychia
346 Onychia
347 Encauſis
348 Phimoſis
349 Paraphimoſis
350 Pernio.

ORD. II. *TUMORES.*

351 Phlegmone
352 Furunculus
353 Anthrax
354 Abſceſſus
355 Onyx
356 Hippopyon
357 Phygethlon
358 Empyema
359 Phyma
360 Ecthymata
361 Urticaria
362 Parulis
363 Epulis
364 Anchylops
365 Paragloſſa
366 Chilon
367 Scrofula
368 Bubon
369 Bronchocele
370 Parotis

371 Gongrona
372 Sparganosis
373 Coilima
374 Scirrhus
375 Cancer
376 Sarcoma
377 Polypus
378 Condyloma
379 Ganglion
380 Ranula
381 Terminthus
382 Œdema
383 Encephalocele
384 Hydrocephalum
385 Hydrophthalmia
386 Spina bifida
387 Hydromphalus
388 Hydrocele
389 Hydrops Scroti
390 Steatites
391 Pneumatosis
392 Emphysema
393 Hysteroptosis
394 Cystoptosis
395 Archoptoma
396 Bubonocele
397 Oscheocele
398 Omphalocele
399 Merocele
400 Enterocele ovularis
401 Ischiatocele
402 Elytrocele
403 Hypogastrocele
404 Cystocele
405 Cyrtoma
406 Hydrenterocele
407 Varix
408 Aneurisma
409 Cirsocele
410 Gastrocele
411 Hepatocele
412 Splenocele
413 Hysterocele
414 Hygrocirsocele
415 Sarcocele
416 Physcocele
417 Exostoses
418 Hyperostosis
419 Pædarthrocace
420 Encystis
421 Staphyloma
422 Staphylosis
423 Fungus
424 Tofus
425 Flemen.

Ord. III. *EXTUBERANTIÆ.*

426 Verruca
427 Porrus
428 Clavus
429 Callus
430 Enchantis
431 Pladarotis
432 Pinnula
433 Pterygium
434 Hordeolum
435 Grando
436 Varus
437 Gutta rosacea
438 Ephelis
439 Esoche
440 Exoche.

ORD. IV. *PUSTULÆ & PAPULÆ.*

441 Epinyctis
442 Phlyctæna
443 Herpes
444 Scabies
445 Aquula
446 Hydroa
447 Variola
448 Varicella
449 Purpura
450 Encauma.

ORD. V. *MACULÆ.*

451 Ecchymoma
452 Petechiæ
453 Morbilli
454 Scarlatæ
455 Lentigo
456 Urticaria
457 Stigma
458 Vibex
459 Vitiligo
460 Leuce
461 Cyasma
462 Lichen
463 Selina
464 Nebula.

ORD. VI. *DISSOLUTIONES.*

465 Vulnus
466 Ruptura
467 Rhagas
468 Fractura
469 Fissura
470 Plicatio
471 Thlasis
472 Luxatio
473 Subluxatio
474 Diachalasis
475 Attritis
476 Porrigo
477 Aposyrma
478 Anapleusis
479 Spasma
480 Contusio
481 Diabrosis
482 Agomphiasis
483 Eschara
484 Piptonychia
485 Cacoëthes
486 Therioma
487 Carcinoma
488 Phagedæna
489 Noma
490 Sycosis
491 Fistula
492 Sinus
493 Caries
494 Achores
495 Crusta lactea
496 Favus
497 Tinea
498 Argemon
499 Ægilops
500 Ozæna
501 Aphthæ
502 Intertrigo
503 Rhacosis.

ORD. VII. *CONCRETIONES.*

504 Ancyloblepharon
505 Zynizesis
506 Dacrymoma
507 Ancylogloſſum
508 Ancyloſis
509 Cicatrix
510 Dactylion.

CLASS XI. DEFORMITATES.

511 Phoxos
512 Gibber
513 Caput obſtipum
514 Strabiſmus
515 Myopiaſis
516 Lagophthalmus
517 Trichiaſis
518 Ectropium
519 Entropium
520 Rhœas
521 Rhyſſemata
522 Lagocheilos
523 Melachoſteon
524 Hirſuties
525 Canities
526 Diſtrix
527 Xiraſia
528 Phalacrotis
529 Alopecia
530 Madaroſis
531 Ptiloſis
532 Rodatio
533 Phalangoſis
534 Coloboma
525 Cercoſis
536 Choloſis
537 Grypoſis
538 Nævus
539 Monſtroſitas
540 Polyſarcia
541 Iſchnotis
542 Rhicnoſis
543 Varus
544 Valgus
545 Leiopodes
546 Apella
547 Hypoſpadiæos
548 Urorhœas
549 Atreta
550 Saniodes
551 Cripſorchis
552 Hermaphroditis
553 Dionyſiſcus
554 Artetiſcus
555 Nefrendis
556 Spanopogon
557 Hyperatetiſcus
558 Galiancon
559 Galbulus
560 Mola.

SYNOPTICAL VIEW

OF THE

SYSTEM OF SAGAR.

AFTER that of Vogel, a ſyſtem appeared by the celebrated Sagar, a phyſician at Inglaw in *Moravia*, ſtill more extended, and having no fewer than thirteen claſſes, according to the following view.

Class I. VITIA.

Ord. I. *MACULÆ.*

1 Leucoma
2 Vitiligo
3 Ephelis
4 Nævus
5 Ecchymoma.

Ord. II. *EFFLORESCENTIÆ.*

6 Puſtula
7 Papula
8 Phlyctthæna
9 Bacchia
10 Varus.
11 Herpes
12 Epinyctis
13 Hemeropathos
14 Pſydracia
15 Hydroa.

Ord. III. *PHYMATA.*

16 Erythema
17 Œdema
18 Emphyſema
19 Scirrhus

20 Inflammatio
21 Bubo
22 Parotis
23 Furunculus
24 Anthrax
25 Cancer
26 Paronychia
27 Phymosis.

Ord. IV. *EXCRESCENTIÆ.*

28 Sarcoma
29 Condyloma
30 Verruca
31 Pterygium
32 Hordeolum
33 Trachelophyma
34 Exostosis.

Ord. V. *CYSTIDES.*

35 Aneurysma
36 Varix
37 Marisca
38 Hydatis
39 Staphyloma
40 Lupia
41 Hydarthus
42 Apostema
43 Exomphalus.
44 Oscheophyma.

Ord. VI. *ECTOPIÆ.*

45 Exophthalmia
46 Blepharoptosis
47 Hypostaphyle
48 Paraglossa
49 Proptoma
50 Exania
51 Exocystis
52 Hysteroptosis
53 Colpoptosis.
54 Gastrocele
55 Omphalocele
56 Hepatocele.
57 Merocele
58 Bubonocele
59 Opodeocele
60 Ischiocele
61 Colpocele
62 Perinæocele
63 Peritonæorixis
64 Encephalocele
65 Hysteroloxia
66 Parorchydium
67 Exarthrema
68 Diastasis
69 Loxarthrus
70 Gibbosita
71 Lordosis.

Ord. VII. *DEFORMITATES.*

72 Lagostoma.
73 Apella.
74 Polymerisma
75 Epidosis
76 Anchylomerisma
77 Hirsuties.

CLASS II. PLAGÆ.

ORD. I. *SOLUTIONES recentes, cruentæ.*

78 Vulnus
79 Punctura
80 Sclopetoplaga
81 Morsus
82 Excoriatio
83 Contusio
84 Ruptura.

ORD. II. *SOLUTIONES recentes, cruentæ, artificiales.*

85 Operatio
86 Amputatio
87 Sutura
88 Paracentesis.

ORD. III. *SOLUTIONES incruentæ.*

89 Ulcus
90 Exulceratio
91 Fistula
92 Sinus
93 Eschara
94 Caries
95 Arthrocace.

ORD. IV. *SOLUTIONES anomalæ.*

96 Rhagas
97 Ambustio
98 Fractura
99 Fissura.

CLASS III. CACHEXIÆ.

ORD. I. *MACIES.*

100 Tabes
101 Phthisis
102 Atrophia
103 Hæmatoporia
104 Aridura.

ORD. II. *INTUMESCENTIÆ.*

105 Plethora.
106 Polysarcia.
107 Pneumatosis
108 Anasarca
109 Phlegmatia
110 Physconia
111 Graviditas.

ORD. III. *HYDROPES partiales.*

112 Hydrocephalus
113 Physocephalus
114 Hydrorachitis
115 Ascites
116 Hydrometra
117 Physometra
118 Tympanites
119 Meteorismus.

ORD. IV. *TUBERA.*

120 Rachitis
121 Scrofula
122 Carcinoma
123 Leontiasis
124 Malis
125 Framboesia.

ORD. V. *IMPETIGINES.*

126 Syphilis
127 Scorbutus
128 Elephantiasis
129 Lepra
130 Scabies
131 Tinea.

ORD. VI. *ICTERITIÆ.*

132 Aurigo
133 Melasicterus
134 Phœnigmus
135 Chlorosis.

ORD. VII. *ANOMALÆ.*

136 Phthiriasis
137 Trichoma
138 Alopecia
139 Elcosis
140 Gangræna
141 Necrosis.

CLASS IV. DOLORES.

ORD. I. *VAGI.*

142 Arthritis
143 Ostocopus
144 Rheumatismus
145 Catarrhus.
146 Anxietas
147 Lassitudo
148 Stupor
149 Pruritus
150 Algor
151 Ardor

ORD. II. *CAPITIS.*

152 Cephalalgia
153 Cephalæa
154 Hemicrania
155 Ophthalmia
156 Otalgia
157 Odontalgia.

ORD. III. *PECTORIS.*

158 Pyrosis
159 Cardiogmus.

ORD. IV. *ABDOMINIS.*

160 Cardialgia
161 Gastrodynia
162 Colica
163 Hepatalgia
164 Splenalgia
165 Nephralgia
166 Hysteralgia.

ORD. V. *EXTERNARUM.*

167 Mastodynia
168 Rachialgia
169 Lumbago
170 Ischias
171 Proctalgia
172 Pudendagra.
173 Digitium.

CLASS V. FLUXUS.

ORD. I. *SANGUIFLUXUS.*

174 Hæmorrhagia
175 Hæmoptysis
176 Stomacace
177 Hæmatemesis
178 Hæmaturia
179 Metrorrhagia
180 Abortus.

ORD. II. *ALVIFLUXUS sanguinolenti.*

181 Hepatirrhœa
182 Hæmorrhois
183 Dysenteria
184 Melæna.

ORD. III. *ALVIFLUXUS non sanguinolenti.*

185 Nausea
186 Vomitus
187 Ileus
188 Cholera
189 Diarrhœa
190 Cœliaca
191 Lienteria
192 Tenesmus
193 Proctorrhœa.

ORD. IV. *SERIFLUXUS.*

194 Ephidrosis
195 Epiphora
196 Coryza
197 Ptyalismus

198 Anacatharsis
199 Diabetes
200 Enuresis
201 Pyuria
202 Leucorrhœa
203 Lochiorrhœa
204 Gonorrhœa
205 Galactirrhœa
206 Otorrhœa.

ORD. V. *AERIFLUXUS.*

207 Flatulentia
208 Ædosophia
209 Dysodia.

CLASS VI. SUBPRESSIONES.

ORD. I. *EGEREMDORUM.*

210 Adiapneustia
211 Sterilitas
212 Ischuria
213 Dysuria
214 Aglactatio
215 Dyslochia.

ORD. II. *INGERENDORUM.*

216 Dysphagia
217 Angina.

ORD. III. *IMI VENTRIS.*

218 Dysmenorrhœa
219 Dystocia
220 Dyshæmorrhois
221 Obstipatio.

CLASS VII. SPASMI.

ORD. I. *TONICI PARTIALES.*

222 Strabismus
223 Trismus
224 Obstipitas
225 Contractura
226 Crampus
227 Priapismus.

ORD. II. *TONICI GENERALES.*

228 Tetanus
229 Catochus.

ORD. III. *CLONICI PARTIALES.*

230 Nyſtagmus
231 Carphologia
232 Subſultus
233 Pandiculatio
234 Apomyſtoſis
235 Convulſio
236 Tremor
237 Palpitatio
238 Claudicatio.

ORD. IV. *CLONICI GENERALES.*

239 Phricaſmus
240 Eclampſia
241 Epilepſia
242 Hyſteria
243 Scelotyrbe
244 Beriberia.

CLASS VIII. ANHELATIONES.

ORD. I. *SPASMODICÆ.*

245 Ephialtes
246 Sternutatio
247 Oſcedo
248 Singultus
249 Tuſſis.

ORD. II. *SUPPRESSIVÆ.*

250 Stertor
251 Dyſpnœa
252 Aſthma
253 Orthopnœa
254 Pleurodyne
255 Rheuma.
256 Hydrothorax
257 Empyema.

CLASS IX. DEBILITATES.

ORD. I. *DYSÆSTHESIÆ.*

258 Amblyopia
259 Caligo
260 Cataracta
261 Amauroſis
262 Anoſmia.
263 Agheuſtia
264 Dyſecoea
265 Paracuſis
266 Cophoſis
267 Aneſtheſia.

ORD. II. *ANEPITHYMIÆ.*

268 Anorexia
269 Adipsia
270 Anaphrodysia.

ORD. III. *DYSCINESIÆ.*

271 Mutitas
272 Aphonia
273 Pfelliſmus.
274 Cacophonia
275 Paralyſis
276 Hemiplegia
277 Paraplexia.

ORD. IV. *LEIPOPSYCHIÆ.*

278 Aſthenia
279 Lipothymia
280 Syncope
281 Aſphyxia.

ORD. V. *COMATA.*

282 Catalepſis
283 Ecſtaſis
284 Typhomania
285 Lethargus
286 Cataphora
287 Carus
288 Apoplexia.

CLASS X. EXANTHEMATA.

ORD. I. *CONTAGIOSA.*

289 Peſtis
290 Variola
291 Pemphigus
292 Purpura
293 Rubeola
294 Scarlatina.

ORD. II. *NON CONTAGIOSA.*

295 Miliaris
296 Eryſipelas
297 Eſſera
298 Aphtha.

CLASS XI. PHLEGMASIÆ.

ORD. I. *MUSCULOSÆ.*

299 Phlegmone
300 Cynanche
301 Myoſitis
302 Carditis.

ORD. II. *MEMBRANACEÆ.*

303 Phrenitis
304 Diaphragmitis
305 Pleuritis
306 Gaſtritis
307 Enteritis
308 Epiploitis
309 Cyſtitis.

ORD. III. *PARENCHYMATOSÆ.*

310 Cephalitis
311 Peripneumonia
312 Hepatitis
313 Splenitis
314 Nephritis
315 Metritis.

CLASS XII. FEBRES.

ORD. I. *CONTINUÆ.*

316 Judicatoria
317 Humoraria
318 Frigeraria
319 Typhus
320 Hectica.

ORD. II. *REMITTENTES.*

321 Amphimerina
322 Tritæophya
323 Tetartophya.

ORD. III. *INTERMITTENTES.*

324 Quotidiana
325 Tertiana
326 Quartana
327 Erratica.

CLASS XIII. VESANIÆ.

ORD. I. *HALLUCINATIONES.*

328 Vertigo
329 Suffuſio
330 Diplopia
331 Syrigmos
332 Hypochondriaſis
333 Somnambuliſmus.

ORD. II. *MOROSITATES.*

334 Pica
335 Bulimia
336 Polydipsia
337 Antipathia
338 Noſtalgia
339 Panophobia
340 Satyriaſis
341 Nymphomania
342 Tarantiſmus
343 Hydrophobia
344 Rabies.

ORD. III. *DELIRIA.*

345 Paraphroſyne
346 Amentia
347 Melancholia
348 Dæmonomania
349 Mania.

ORD. IV. *ANOMALÆ.*

350 Amneſia
351 Agrypnia.

SYNOPTICAL VIEW

OF THE

SYSTEM OF DR. MACBRIDE

IN the year 1772 appeared a ſyſtem of practice by Dr. Macbride, of Dublin; and, connected with it, an appropriate Noſology was formed by him. It circumſcribes the claſſes to four, and alſo the orders in a ſimilar proportion.

CLASS I. UNIVERSAL DISEASES.

ORD. I. *FEVERS.*

1 Continued
2 Intermittent
2 Remittent
4 Eruptive
5 Hectic.

ORD. II. *INFLAMMATIONS.*

6 External
7 Internal.

ORD. III. *FLUXES.*

8 Alvine
9 Hæmorrhage
10 Humoral diſcharge.

ORD. IV. *PAINFUL DISEASES.*

11 Gout
12 Rheumatiſm
13 Oſtocopus
14 Head-ach

15 Tooth-ach
16 Ear-ach
17 Pleurodyne
18 Pain in the ſtomach
19 Colic
20 Lithiaſis
21 Iſchuria
22 Proctalgia.

ORD. V. *SPASMODIC DISEASES.*

23 Tetanus
24 Catochus
25 Locked-jaw
26 Hydrophobia
27 Convulſion
28 Epilepſy
29 Eclampſia
30 Hieranoſos.

ORD. VI. *WEAKNESS and PRIVATIONS.*

31 Coma
32 Palſy
33 Faining.

ORD. VII. *ASTHMATIC DISORDERS.*

34 Dyſpnœa
35 Orthopnœa
36 Aſthma
37 Hydrothorax
38 Empyema.

ORD. VIII. *MENTAL DISEASES.*

39 Mania
40 Melancholia.

ORD. IX. *CACHEXIES, or Humoral Diſeaſes.*

41 Corpulency
42 Dropſy
43 Jaundice
44 Emphyema
45 Tympany
46 Phyſconia
47 Atrophia
48 Oſteoſarcoſis
49 Sarcoſtoſis
50 Mortification
51 Scurvy
52 Scrofula
53 Cancer
54 Lues Venerea.

CLASS II. LOCAL DISEASES.

ORD. I. *OF THE INTERNAL SENSES.*

55 Loſs of Memory
56 Hypochondriaſis
57 Loſs of Judgment

ORD. II. *OF THE EXTERNAL SENSES.*

58 Blindneſs
59 Depraved Sight
60 Deafneſs
61 Depraved Hearing
62 Loſs of Smell
63 Depraved Smell
64 Loſs of Taſte
65 Depraved Taſte
66 Loſs of Feeling.

ORD. III. *OF THE APPETITES.*

67 Anorexia
68 Cynorexia
69 Pica
70 Polydypſia
71 Satyriaſis
72 Nymphomania
73 Anaphrodiſia.

ORD. IV. *OF THE ŒCRETIONS AND EXCRETIONS.*

74 Epiphora
75 Coryza
76 Ptyaliſm
77 Anacatharſis
78 Otorrhœa
79 Diarrhœa
80 Incontinence of Urin
81 Pyuria
82 Dyſuria
83 Conſtipation
84 Teneſmus
85 Dyſodia
86 Flatulence
87 Œdoſophia.

ORD. V. *IMPEDING DIFFERENT ACTIONS.*

88 Aphonia
89 Mutitas
90 Paraphonia
91 *Dyſphagia*
92 Wry-neck
93 Angone
94 Sneezing
95 Hiccup
96 Cough
97 Vomiting
98 Palpitation of the Heart.
99 Corea
100 Triſmus
101 Nyſtagmus
102 Cramp
103 Scelotyrbe
104 Contraction
105 Paralyſis
106 Anchyloſis
107 Gibboſitas
108 Lordoſis
109 Hydarthrus.

ORD. VI. *OF THE EXTERNAL HABIT.*

110 Tumor
111 Excreſcence
119 Leproſy
120 Elephantiaſis

112 Aneuriſm
113 Varix
114 Papulæ
115 Phlyctænæ
116 Puſtulæ
117 Scabies, or Pſora
118 Impetigo
121 Frambœſia
122 Herpes
123 Maculæ
124 Alopecia
125 Trichoma
126 Scald Head
127 Phthiriaſis.

ORD. VII. *DISLOCATIONS.*

128 Hernia
129 Prolapſus
130 Luxation.

ORD. VIII. *SOLUTIONS OF CONTINUITY.*

131 Wound
132 Ulcer
133 Fiſſure
134 Fiſtula
135 Burn or Scald
136 Excoriation
137 Fracture
138 Caries.

CLASS III. SEXUAL DISEASES.

ORD. I. *GENERAL, proper to Men.*

139 Febris Teſticularis 140 Tabes Dorſalis

ORD. II. *LOCAL, proper to Men.*

141 Dyſpermatiſmus
142 Gonorrhœa ſimplex
143 Gonorrhœa virulenta
144 Priapiſm
145 Phymoſis
146 Paraphymoſis
147 Chryſtalline
148 Hernia Humoralis
149 Hydrocele
150 Sarcocele
151 Cirſocele.

ORD. III. *GENERAL, proper to Women.*

152 Amenorrhœa
153 Chloroſis
154 Leucorrhœa
155 Menorrhagia
156 Hyſteralgia
157 Graviditas
158 Abortus
159 Dyſtocia
160 Febris puerperalis
161 Maſtodynia.

ORD. IV. *LOCAL, proper to Women.*

162 Hydrops ovarii
163 Scirrhus ovarii
164 Hydrometra
165 Phyſometra
166 Prolapſus uteri
167 ——— vaginæ
168 Polypus Uteri

CLASS IV. INFANTILE DISEASES.

ORD. I. *GENERAL.*

169 Colica meconialis
170 Colica lactentium.
171 Diarrhœa infantum
172 Aphthæ
173 Eclampſia
174 Atrophia
175 Rachitis.

ORD. II. *LOCAL.*

176 Imperforation.
177 Anchyloglofſum
178 Aurigo
179 Purpura
181 Cruſta Lactea.

Dr. Macbride's ſyſtem was ſucceeded by that of Dr. Cullen, a man faulty as a theoriſt, but whoſe Hiſtory of Diſeaſes and Syſtem of Noſology, the fruit of accurate obſervation, will remain the laſting monuments of his fame. Before examining his ſyſtem, we ſhall conſider a more modern one, or that of Dr. Darwin.

VIEW

OF THE

SYSTEM OF DR. DARWIN.

IN his introduction to the Zoönomia, an arrangement of diſeaſes is formed by Dr. Darwin on philoſophical principles; and more ſplendid therefore, and complex in its ſtricture, than uſeful in its application to practice. It is divided into four general Claſſes, under the names of Diſeaſes of Irritation, Diſeaſes of Senſation, Diſeaſes of Volition, and Diſeaſes of Aſſociation; and theſe undergo their various ſub-diviſions in the following manner:—

CLASS I.

DISEASES OF IRRITATION.

ORD. I. *INCREASED IRRITATION.*

GENUS I.—With increaſed Actions of the Sanguiferous Syſtem.

Sp. 1.	*Febris irritativa*	Irritative fever
2.	*Ebrietas*	Drunkenneſs
3.	*Hæmorrhagia arterioſa*	Arterial hæmorrhage
4.	*Hæmoptoe arterioſa*	Spitting of arterial blood
5.	*Hæmorrhagia nariuin*	Bleeding from the noſe.

Genus II.—With increaſed Actions of the Secerning Syſtem.

Sp. 1.	*Calor febrilis*	Febrile heat
2.	*Rubor febrilis*	Febrile redneſs
3.	*Sudor calidus*	Warm ſweat
	—— *febrilis*	Sweat in fevers
	—— *a labore*	—— from exerciſe
	—— *ab igne*	—— from fire
	—— *a medicamentis*	—— from medicines
4.	*Urina uberior colorata*	Copious coloured urine
5.	*Diarrhœa calida*	Warm diarrhœa
	—— *febrilis*	—— from fever
	—— *crapuloſa*	—— from indigeſtion
	—— *infantum*	—— of infants
6.	*Salivatio calida*	—— ſalivation
7.	*Catarrhus calidus*	—— catarrh
8.	*Expectoratio calida*	—— expectoration
9.	*Exſudatio pone aures*	Diſcharge behind the ears
10.	*Gonorrhœa calida*	Warm gonorrhœa
11.	*Fluor albus calidus*	—— fluor albus
12.	*Hæmorrhois alba*	White piles
13.	*Serum e veſicatorio*	Diſcharge from a bliſter
14.	*Perſpiratio fœtida*	Fetid perſpiration
15.	*Crines novi*	New hairs.

Genus III.—With increaſed Actions of the Abſorbent Syſtem.

Sp. 1.	*Lingua arida*	Dry tongue
2.	*Fauces aridæ*	Dry throat
3.	*Nares aridi*	Dry noſtrils
4.	*Expectoratio ſolida*	Solid expectoration
5.	*Conſtipatio alvi*	Coſtiveneſs
6.	*Cutis arida*	Dry ſkin
7.	*Urina parcior colorata*	Diminiſhed coloured urine

8.	*Calculus felleus et icterus*	Gall-ſtone and jaundice
9.	——— *renis*	Stone of the kidney
10.	——— *veſicæ*	Stone of the bladder
11.	——— *arthriticus*	Gout-ſtone
12.	*Rheumatiſmus chronicus*	Chronic rheumatiſm
13.	*Cicatrix vulnerum*	Healing of ulcers
14.	*Corneæ obfuſcatio*	Scar on the cornea.

Genus IV.—With increaſed Actions of other Cavities and Membranes.

Sp. 1.	*Nictitatio irritativa*	Irritative nictitation
2.	*Deglutitio irritativa*	Irritative deglutition
3.	*Reſpiratio et tuſſis*	Reſpiration and cough
4.	*Excluſio bilis*	Excluſion of the bile
5.	*Dentitio*	Toothing
6.	*Priapiſmus*	Priapiſm
7.	*Diſtenſio mamularum*	Diſtenſion of the nipples
8.	*Deſcenſus uteri*	Deſcent of the uterus
9.	*Prolapſus ani*	Deſcent of the rectum
10.	*Lumbricus*	Round worm
11.	*Tænia*	Tape-worm.
12.	*Aſcarides*	Thread-worms.
13.	*Dracunculus*	Guinea-worm
14.	*Morpiones*	Crab-lice
15.	*Pediculi*	Lice.

Genus V.—With increaſed Actions of the Organs of Senſe.

Sp. 1.	*Viſus acrior*	Acuter ſight
2.	*Auditus acrior*	——— hearing
3.	*Olfactus acrior*	——— ſmell
4.	*Guſtus acrior*	——— taſte
5.	*Tactus acrior*	——— touch

6.	*Senſus caloris acrior*	Acute ſenſe of heat
7.	——— *extenſionis acrior*	——— ſenſe of extenſion
8.	*Titillatio*	Tickling
9.	*Pruritus*	Itching
10.	*Dolor urens*	Smarting
11.	*Conſternatio*	Surpriſe.

Ord. II. *DECREASED IRRITATION.*

Genus I.—With decreaſed Actions of the Sanguiferous Syſtem.

Sp. 1.	*Febris inirritativa*	Inirritative fever
2.	*Pareſis inirritativa*	——— debility
3.	*Somnus interruptus*	Interrupted ſleep
4.	*Syncope*	Fainting
5.	*Hæmorrhagia venoſa*	Venous hæmorrhage
6.	*Hæmorrhoïs cruenta*	Bleeding piles
7.	*Hæmorrhagia renum*	——— from the kidneys
8.	——— ——— *hepatis*	——— from the liver
9.	*Hæmoptoë venoſa*	Spitting of venous blood
10.	*Palpitatio cordis*	Palpitation of the heart
11.	*Menorrhagia*	Exuberant menſtruation
12.	*Dyſmenorrhagia*	Deficient menſtruation
13.	*Lochia nimia*	Too great lochia
14.	*Abortio ſpontanea*	Spontaneous abortion
15.	*Scorbutus*	Scurvy
16.	*Vibices*	Extravaſations of blood
17.	*Petechiæ*	Purple ſpots.

GENUS II.—With decreaſed Actions of the Secerning Syſtem.

Sp. 1.	*Frigus febrile*	Coldneſs in fevers
	——— *chronicum*	——— permanent
2.	*Pallor fugitivus*	Paleneſs fugitive
	——— *permanens*	——— permanent
3.	*Pus parcius*	Diminiſhed pus
4.	*Mucus parcior*	Diminiſhed mucus
5.	*Urina parcior pallida*	Pale diminiſhed urine
6.	*Torpor hepaticus*	Torpor of the liver
7.	*Torpor pancreatis*	Torpor of the pancreas
8.	*Torpor renis*	Torpor of the kidney
9.	*Punctæ mucoſæ vultus*	Mucous ſpots on the face
10.	*Maculæ cutis fulvæ*	Tawny blots on the ſkin
11.	*Canities*	Grey hairs
12.	*Callus*	Callus
13.	*Cataracta*	Cataract
14.	*Innutritio oſſium*	Innutrition of the bones
15.	*Rachitis*	Rickets
16.	*Spinæ diſtortio*	Diſtortion of the ſpine
17.	*Claudicatio coxaria*	Lameneſs of the hip
18.	*Spina protuberans*	Protuberant ſpine
19.	*Spina bifida*	Divided ſpine
20.	*Defectus palati*	Defect of the palate.

GENUS III.—With decreaſed Actions of the Abſorbent Syſtem.

Sp. 2.	*Mucus faucium frigidus*	Cold mucus from the throat
2.	*Sudor frigidus*	——— ſweat
3.	*Catarrhus frigidus*	——— catarrh
4.	*Expectoratio frigida*	——— expectoration
5.	*Urina uberior pallida*	Copious pale urine

6. *Diarrhœa frigida*	Cold diarrhœa
7. *Fluor albus frigidus*	—— fluor albus
8. *Gonorrhœa frigida*	—— gonorrhœa
9. *Hepatis tumor*	Swelling of the liver
10. *Chlorosis*	Green sickness
11. *Hydrocele*	Dropsy of the vagina testis
12. *Hydrocephalus internus*	—— of the brain
13. *Ascites*	—— of the belly
14. *Hydrothorax*	—— of the chest
15. *Hydrops ovarii*	—— of the ovary
16. *Anasarca pulmonum*	—— of the lungs
17. *Obesitas*	Corpulency
18. *Splenis tumor*	Swelling of the spleen
19. *Genu tumor albus*	White swelling of the knee
20. *Bronchocele*	Swelled throat
21. *Scrofula*	King's evil
22. *Schirrus*	Schirrus
23. —— *recti*	—— of the rectum
24. —— *urethræ*	—— of the urethra
25. —— *æsophagi*	—— of the throat
26. *Lacteorum inirritabilitas*	Inirritability of the lacteals
27. *Lymphaticorum inirritabilitas*	Inirritability of the lymphatics.

Genus IV.—With decreased Actions of other Cavities and Membranes.

Sp. 1. *Sitis calida*	Thirst warm
—. *frigida*	—— cold
2. *Esuries*	Hunger
3. *Nausea sicca*	Dry nausea
4. *Ægritudo ventriculi*	Sickness of stomach
5. *Cardialgia*	Heartburn
6. *Arthritis ventriculi*	Gout of the stomach
7. *Colica flatulenta*	Flatulent colic
8. *Colica saturnina*	Colic from lead
9. *Tympanitis*	Tympany

10.	*Hypochondriaſis*	Hypochondriaciſm
11.	*Cephalæa frigida*	Cold head-ach
12.	*Odontalgia*	Tooth-ach
13.	*Otalgia*	Ear-ach
14.	*Pleurodyne chronica*	Chronical pain of the ſide
15.	*Sciatica frigida*	Cold ſciatica
16.	*Lumbago frigida*	—— lumbago
17.	*Hyſteralgia frigida*	—— pain of the uterus
18.	*Proctalgia frigida*	—— pain of the rectum
19.	*Veſicæ felleæ inirritabilitas et icterus*	Inirritability of the gall-bladder and jaundice.

Genus V.—With decreaſed Actions of the Organs of Senſe.

Sp. 1.	*Stultitia inirritabilis*	Folly from inirritability
2.	*Viſus imminutus*	Impaired viſion
3.	*Muſcæ volitantes*	Dark moving ſpecks
4.	*Strabiſmus*	Squinting
5.	*Amauroſis*	Palſy of the optic nerve
6.	*Auditus imminutus*	Impaired hearing
7.	*Olfactus imminutus*	—— ſmell
8.	*Guſtus imminutus*	—— taſte
9.	*Tactu, imminutus*	—— touch
10.	*Stupor*	Stupor.

Ord. III. *RETROGRADE IRRITATIVE MOTIONS.*

Genus I.—Of the Alimentary Canal.

Sp. 1.	*Ruminatio*	Chewing the cud
2.	*Ructus*	Eructation
3.	*Apepſia*	Indigeſtion, water-qualm
4.	*Vomitus*	Vomiting
5.	*Cholera*	Cholera
6.	*Ileus*	Iliac paſſino.

7.	*Globus hyſtericus*	Hyſteric ſtrangulation
8.	*Vomendi conamen inane*	Vain efforts to vomit
9.	*Borborigmus*	Gurgling of the bowels
10.	*Hyſteria*	Hyſteric diſeaſe
11.	*Hydrophobia*	Dread of water.

Genus II.—Of the Abſorbent Syſtem.

Sp. 1.	*Catarrhus lymphaticus*	Lymphatic catarrh
2.	*Salivatio lymphatica*	Lymphatic ſalivation
3.	*Nauſea humida*	Moiſt nauſea
4.	*Diarrhœa lymphatica*	Lymphatic flux
5.	*Diarrhœa chyliſera*	Flux of chyle
6.	*Diabætes*	Diabetes
7.	*Sudor lymphaticus*	Lymphatic ſweat
8.	*Sudor aſthmaticus*	Aſthmatic ſweat
9.	*Tranſlatio puris*	Tranſlation of matter
10.	——— *lactis*	——— of milk
11.	——— *urinæ*	——— of urine.

Genus III.—Of the Sanguiferous Syſtem.

Sp. 1.	*Capillarium motus retrogreſſus*	Retrograde motion of the capillaries
2.	*Palpitatio cordis*	Palpitation of the heart
3.	*Anhelatio ſpaſmodica*	Spaſmodic panting.

CLASS II.

DISEASES OF SENSATION.

ORD. I.—*INCREASED SENSATION.*

GENUS I.—With increaſed Action of the Muſcles.

Sp. 1.	*Deglutitio*	Deglutition
2.	*Reſpiratio*	Reſpiration
3.	*Sternutatio*	Sneezing
4.	*Anhelitus*	Panting
5.	*Tuſſis ebriorum*	Cough of inebriates
6.	*Syngultus*	Hiccough
7.	*Aſthma humorale*	Humoral aſthma
8.	*Nictitatio ſenſitiva*	Winking from pain
9.	*Oſcitatio et pandiculatio*	Yawning and ſtretching
10.	*Teneſmus*	Teneſmus
11.	*Stranguria*	Strangury
12.	*Parturitio*	Parturition.

GENUS II.—With the Production of new Veſſels by internal Membranes or Glands, with Fever.

Sp. 1.	*Febris ſenſitiva irritata*	Senſitive irritated fever
2.	*Ophthalmia interna*	Inflammation of the eye
3.	*Phrenitis*	——— of the brain
4.	*Peripneumonia.*	——— of the lungs
	——— *trachealis*	——— the croup

5. *Pleuritis*	Inflammation of the pleura
6. *Diaphragmatis*	——— of the diaphragm
7. *Carditis*	——— of the heart
8. *Peritonitis*	——— of the peritoneum
9. *Meſenteritis*	——— of the meſentery
10. *Gaſtritis*	——— of the ſtomach
11. *Enteritis*	——— of the bowels
12. *Hepatitis*	——— of the liver
13. *Splenitis*	——— of the ſpleen
14. *Nephritis*	——— of the kidney
15. *Cyſtitis*	——— of the bladder
16. *Hyſteritis*	——— of the womb
17. *Lumbago ſenſitiva*	——— of the loins
18. *Iſchias*	——— of the pelvis
19. *Paronychia interna*	——— beneath the nails.

GENUS II.—With the Production of new Veſſels by external Membranes or Glands, with Fever.

Sp. 1. *Febris ſenſitiva inirritata*	Senſitive inirritated fever
2. *Eryſipelas irritatum*	Eryſipelas irritated
——— *inirritatum*	——— inirritated
——— *ſenſitivum*	——— ſenſitive
3. *Tonſillitis interna*	Angina internal
——— *ſuperficialis*	——— ſuperficial
——— *inirritata*	——— inirritated
4. *Parotitis ſuppurans*	Mumps ſuppurative
——— *mutabilis*	——— mutable
——— *felina*	——— of cats
5. *Catarrhus ſenſitiva*	Catarrh inflammatory
6. ——— *contagioſus*	——— contagious
——— *equinus et caninus*	——— among horſes and dogs

7. *Peripneumonia ſuperficialis*	Superficial peripneumony
8. *Pertuſſis*	Chincough
9. *Variola diſcreta*	Small-pox diſtinct
—— *confluens*	—— confluent
—— *inoculata*	—— —— inoculated
10. *Rubeola irritata*	Meaſles irritated
—— *inirritata*	—— inirritated
11. *Scarlatina mitis*	Scarlet fever mild
—— *maligna*	—— malignant
12. *Miliaria ſudatoria*	Miliary fever ſudatory
—— *irritata*	—— irritated
—— *inirritata*	—— inirritated
13. *Peſtis*	Plague
—— *vaccina*	—— of horned cattle
14. *Pemphigus*	Bladdery fever
15. *Varicella*	Chicken-pox
16. *Urticaria*	Nettle-raſh
17. *Aphtha ſenſitiva*	Thruſh ſenſitive
—— *irritata*	—— irritated
—— *inirritata*	—— inirritated
18. *Dyſenteria*	Bloody flux
19. *Gaſtritis ſuperficialis*	Superficial inflam. of the ſtomach
20. *Enteritis ſuperficialis*	—— —— of the bowels.

GENUS IV.—With the Production of new Veſſels by internal Membranes or Glands, without Fever.

1. *Ophthalmia ſuperficialis*	Ophthalmy ſuperficial
—— *lymphatica*	—— lymphatic
—— *equina*	—— —— of horſes
2. *Pterigion*	Eye-wing
3. *Tarſitis palpebrarum*	Red eye-lids
4. *Hordeolum*	Stye
5. *Paronychia ſuperficialis*	Whitlow

6.	*Gutta roſea hepatica*	Pimpled face hepatic
	——— *ſtomatica*	——— ſtomatic
	——— *hereditaria*	——— hereditary
7.	*Odontitis*	Inflamed tooth
8.	*Otitis*	——— ear
9.	*Fiſtula lacrymalis*	Fiſtula lacrymalis
10.	*Fiſtula in ano*	Fiſtula in ano
11.	*Hepatitis chronica*	Chronical hepatitis
12.	*Scrofula ſuppurans*	Suppurating ſcrofula
13.	*Scorbutus ſuppurans*	Suppurating ſcurvy
14.	*Schirrus ſuppurans*	Suppurating ſchirrus
15.	*Carcinoma*	Cancer
16.	*Arthrocele*	Swelling of the joints
17.	*Arthropuoſis*	Suppuration of the joints
18.	*Caries oſſium*	Caries of the bones.

GENUS V.—With the Production of new Veſſels by external Membranes or Glands, without Fever.

Sp. 1.	*Gonorrhœa venerea*	Clap
2.	*Syphilis*	Venereal diſeaſe
3.	*Lepra*	Leproſy
4.	*Elephantiaſis*	Elephantiaſis
5.	*Frambœſia*	Frambœſia
6.	*Pſora*	Itch
7.	*Pſora ebriorum*	Itch of drunkards
8.	*Herpes*	Herpes
9.	*Zona ignea*	Shingles
10.	*Annulus repens*	Ring-worm
11.	*Tinea capitis*	Scald-head
12.	*Cruſta lactea*	Milk-cruſt
13.	*Trichoma*	Plica polonica.

GENUS VI.—With Fever conſequent to the Production of new Veſſels or Fluids.

Sp. 1.	*Febris ſenſitiva*	Senſitive fever
2.	—— *a pure clauſo*	Fever from concealed matter
3.	—— *a vomica*	—— from vomica
4.	—— *ab empyemate*	—— from empyema
5.	—— *meſenterica*	—— meſenteric
6.	—— *a pure aërato*	—— from aërated matter
7.	—— *a phthiſi*	—— from conſumption
8.	—— *ſcrofuloſa*	—— ſcrofulous
9.	—— *iſchiadica*	—— from iſchias
10.	—— *arthropuodica*	—— from joint-evil
11.	—— *a pure contagioſo*	—— from contagious matter
12.	—— *varioloſa ſecundaria*	—— ſecondary of ſmall-pox
13.	—— *carcinomatoſa*	—— cancerous
14.	—— *venerea*	—— venereal
15.	—— *a ſanie contagioſa*	—— from contagious ſanies
16.	—— *puerpera*	—— puerperal
17.	—— *a ſphacelo*	—— from ſphacelus.

GENUS VII. With increaſed Action of the Organs of Senſe.

Sp. 1.	*Delirium febrile*	Delirium of fevers
2.	——— *maniacale*	——— maniacal
3.	——— *ebrietatis*	——— of drunkenneſs
4.	*Somnium*	Dreams
5.	*Hallucinatio viſûs*	Deception of ſight
6.	——— *auditus*	——— of hearing
7.	*Rubor a calore*	Bluſh from heat
8.	—— *jucunditalis*	—— from joy
9.	*Priapiſmus amatorius*	Amorous priapiſm
10.	*Diſtentio mamularum*	Diſtenſion of the nipples

ORD. II. *DECREASED SENSATION.*

GENUS I.—With decreased Action of the general System.

Sp. 1.	*Stultitia insensibilis*	Folly from insensibility
2.	*Tædium vitæ*	Irksomeness of life
3.	*Paresis sensitiva*	Sensitive debility.

GENUS II.—With decreased Actions of particular Organs.

1.	*Anorexia*	Want of appetite
2.	*Adipsia*	Want of thirst
3.	*Impotentia*	Impotence
4.	*Sterilitas*	Barrenness
5.	*Insensibilitas artuum*	Insensibility of the limbs
6.	*Dysuria insensitiva*	Insensibility of the bladder
7.	*Accumulatio alvinæ*	Accumulation of fæces

ORD. III. *RETROGRADE SENSITIVE MOTIONS.*

GENUS I.—Of Excretory Ducts.

	Motus retrogressus	Retrograde motion
1.	—— *ureterum*	—— of the ureters
2.	—— *urethræ*	—— of the urethra
3.	—— *ductus choledoci*	—— of the bile-duct.

CLASS III.

DISEASES OF VOLITION.

Ord. I. *INCREASED VOLITION.*

Genus I.—With increaſed Actions of the Muſcles.

Sp. 1.	*Jactitatio*	Reſtleſſneſs
2.	*Tremor febrilis*	Febrile trembling
3.	*Clamor*	Screaming
4.	*Riſus*	Laughter
5.	*Convulſio*	Convulſion
	——— *debilis*	——— weak
6.	——— *dolorifica*	——— painful
7.	*Epilepſia*	Epilepſy
8.	——— *dolorifica*	——— painful
9.	*Somnambuliſmus*	Sleep-walking
10.	*Aſthma convulſivum*	Aſthma convulſive
11.	——— *dolorificum*	——— painful
12.	*Stridor dentium*	Gnaſhing of the teeth
13.	*Tetanus triſmus*	Cramp of the jaw
14.	——— *dolorificus*	——— painful
15.	*Hydrophobia*	Dread of water

Genus II.—With increaſed Actions of the Organs of Senſe.

Sp. 1.	*Mania mutabilis*	Mutable madneſs
2.	*Studium inane*	Reverie
3.	*Vigilia*	Watchfulneſs
4.	*Erotomania*	Sentimental love
5.	*Amor ſui*	Vanity
6.	*Noſtalgia*	Deſire of home
7.	*Spes religioſa*	Superſtitious hope
8.	*Superbia ſtemmatis*	Pride of family
9.	*Ambitio*	Ambition
10.	*Mæror*	Grief
11.	*Tædium vitæ*	Irkſomeneſs of life
12.	*Deſiderium pulchritudinis*	Loſs of beauty
13.	*Paupertatis timor*	Fear of poverty
14.	*Lethi timor*	—— of death
15.	*Orci timor*	—— of hell
16.	*Satyriaſis*	Luſt
17.	*Ira*	Anger
18.	*Rabies*	Rage
19.	*Citta*	Depraved appetite
20.	*Cacoſitia*	Averſion to food
21.	*Syphilis imaginaria*	Imaginary pox
22.	*Pſora imaginaria*	—— itch
23.	*Tabes imaginaria*	—— tabes
24.	*Sympathia aliena*	Pity
25.	*Educatio heroica*	Heroic education.

ORD. II. *DECREASED VOLITION.*

GENUS I.—With decreased Actions of the Muscles.

Sp. 1.	*Lassitudo*	Fatigue
2.	*Vacillatio senilis*	See-saw of old age
3.	*Tremor senilis*	Tremor of old age
4.	*Brachiorum paralysis*	Palsy of the arms
5.	*Raucedo paralytica*	Paralytic hoarseness
6.	*Vesicæ urinariæ paralysis*	Palsy of the bladder
7.	*Recti paralysis*	Palsy of the rectum
8.	*Paresis voluntaria*	Voluntary debility
9.	*Catalepsis*	Catalepsy
10.	*Hemiplegia*	Palsy of one side
11.	*Paraplegia*	Palsy of the lower limbs
12.	*Somnus*	Sleep
13.	*Incubus*	Night-mare
14.	*Lethargus*	Lethargy
15.	*Syncope epileptica*	Epileptic fainting
16.	*Apoplexia*	Apoplexy
17.	*Mors a frigore*	Death from cold

GENUS II.—With decreased Actions of the Organs of Sense.

Sp. 1.	*Recollectionis jactura*	Loss of recollection
2.	*Stultitia voluntaria*	Voluntary folly
3.	*Credulitas*	Credulity.

CLASS IV.

DISEASES OF ASSOCIATION.

ORD. I. *INCREASED ASSOCIATE MOTIONS.*

GENUS I.—Catenated with Irritative Motions.

Sp. 1. *Rubor vultûs pranſorum*	Fluſhing of the face after dinner
2. *Sudor ſtragulis immerſorum*	Sweat from covering the face in bed
3. *Ceſſatio ægritudinis cute excitata*	Cure of ſickneſs by ſtimulating the ſkin
4. *Digeſtio aucta frigore cutaneo*	Digeſtion increaſed by coldneſs of the ſkin
5. *Catarrhus a frigore cutaneo*	Catarrh from cold ſkin
6. *Abſorptio cellularis aucta vomitu*	Cellular abſorption increaſed by vomiting
7. *Syngultus nephriticus*	Nephritic hiccough
8. *Febris irritativa*	Irritative fever

GENUS II.—Catenated with Senſitive Motions.

Sp. 1. *Lacrymar. fluxus ſympatheticus*	Sympathetic tears
2. *Sternutatio a lumine*	Sneezing from light

3. *Dolor dentium a Stridore*	Tooth-edge from grating ſounds
4. *Riſus ſardonicus*	Sardonic ſmile
5. *Salivæ fluxus cibo viſo*	Flux of ſaliva at ſight of food
6. *Tenſio mamularum viſo puerulo*	Tenſion of the nipples of lacteſcent women at ſight of the child
7. *Tenſio penis in hydrophobia*	Tenſion of the penis in hydrophobia
8. *Teneſmus calculoſo*	Teneſmus from ſtone
9. *Polypus narium ex aſcaride*	Polypus of the noſe from aſcarides
10. *Crampus ſurarum in diarrhœa*	Cramp from diarrhœa
11. *Zona ignea nephritica*	Nephritic ſhingles
12. *Eruptio variolarum*	Eruption of ſmall-pox
13. *Gutta roſea ſtomatica*	Stomatic roſy drop
14. —— —— *hepatica*	Hepatic roſy drop
15. *Podagra*	Gout
16. *Rheumatiſmus*	Rheumatiſm
17. *Eryſipelas*	Eryſipelas
18. *Teſtium tumor in gonorrhœa*	Swelled teſtis in gonorrhœa
19. —— —— *in parotitide*	—— —— in mumps.

Genus III.—Catenated with Voluntary Motions.

Sp. 1. *Deglutitio invita*	Involuntary deglutition
2. *Nictitatio invita*	—— —— nictitation
3. *Riſus invita*	—— —— laughter
4. *Luſus digitorum invitus*	—— —— actions with the fingers
5. *Unguium morſiuncula invita*	—— —— biting the nails
6. *Vigilia invita*	—— —— watchfulneſs.

GENUS IV.—Catenated with External Influences.

Sp. 1.	*Vita ovi*	Life of an egg
2.	*Vita hiemi-dormientium*	Life of winter-fleepers
3.	*Pullulatio arborum*	Budding of trees
4.	*Orgaſmatis venerei periodus*	Periods of venereal deſire
5.	*Brachii concuſſio electrica*	Electric ſhock through the arm
6.	*Oxygenatio ſanguinis*	Oxygenation of the blood
7.	*Humectatio corporis*	Humectation of the body.

ORD. II. *DECREASED ASSOCIATE MOTIONS.*

GENUS I.—Catenated with Irritative Motions.

Sp. 1.	*Cutis frigida pranſorum*	Chillneſs after dinner
2.	*Pallor urinæ pranſorum*	Pale urine after dinner
3.	——— *a frigore cutaneo*	——— from cold ſkin
4.	*Pallor ex ægritudine*	Paleneſs from ſickneſs
5.	*Dyſpnœa a balneo frigido*	Shortneſs of breath from cold bathing
6.	*Dyſpepſia a pedibus frigidis*	Indigeſtion from cold feet
7.	*Tuſſis a pedibus frigidis*	Cough from cold feet
8.	——— *hepatica*	Liver-cough
9.	——— *arthritica*	Gout-cough
10.	*Vertigo rotatoria*	Vertigo rotatory
11.	——— *viſualis*	——— viſual
12.	——— *ebrioſa*	——— inebriate
13.	——— *febriculoſa*	——— feveriſh
14.	——— *cerebroſa*	——— from the brain
15.	*Murmur aurium vertiginoſum*	Noiſe in the ears

16. *Tactus, gustus, olfactus vertiginosi* — Vertiginous touch, taste, smell
17. *Pulsus mollis a vomitione* — Soft pulse in vomiting
18. ——— *intermittens a ventriculo* — Intermittent pulse from the stomach
19. *Febris inirritativa* — Inirritative fever.

Genus II.—Catenated with Sensitive Motions.

Sp. 1. *Torpor genæ a dolore dentis* — Coldness of the cheek from tooth-ach
2. *Stranguria a dolore vesicæ* — Strangury from pain of the bladder
3. ——— *convulsio* — Convulsive strangury
4. *Dolor termini ductûs choledochi* — Pain of the end of the bile-duct
5. *Dolor pharyngis abacido gastrico* — Pain of the throat from gastric acid
6. *Pruritus narium a vermibus* — Itching of the nose from worms
7. *Cephalæa* — Head-ach
8. *Hemicrania et otalgia* — Partial head-ach and ear-ach
9. *Dolor humeri in hepatide* — Pain of shoulder in hepatitis
10. *Torpor pedum variolâ erumpente* — Cold feet in eruption of small-pox
11. *Testium dolor nephriticus* — Nephritic pain of testis
12. *Dolor digiti minimi sympatheticus* — Pain of little finger from sympathy
13. *Dolor brachii in hydrope pectoris* — Pain of the arm in dropsy of the chest
14. *Diarrhœa a dentitione* — Diarrhœa from toothing.

Genus III.—Catenated with Voluntary Motions.

Sp. 1.	*Titubatio linguæ*	Impediment of ſpeech
2.	*Chorea Sancti Viti*	St. Vitus's dance
3.	*Riſus*	Laughter
4.	*Tremor ex irâ*	Trembling from anger
5.	*Rubor ex irâ*	Redneſs from anger
6.	——— *criminatus*	Bluſh of guilt
7.	*Tarditas paralytica*	Slowneſs from palſy
8.	——— *ſenilis*	——— of age.

Genus IV.—Catenated with External Influences.

Sp. 1.	*Somni periodus*	Periods of ſleep
2.	*Studii inanis periodus*	——— of reverie
3.	*Hemicraniæ periodus*	——— of head-ach
4.	*Epilepſiæ dolorificæ periodus*	——— of painful epilepſy
5.	*Convulſionis dolorificæ periodus*	——— of painful convulſion
6.	*Tuſſis periodicæ periodus*	——— of periodic cough
7.	*Catameniæ periodus*	——— of catamenia
8.	*Hæmorrhoidis periodus*	——— of the piles
9.	*Podagræ periodus*	——— of the gout
10.	*Eryſipelatis periodus*	——— of eryſipelas
11.	*Febrium periodus*	——— of fevers.

ORD. III.—*RETROGRADE ASSOCIATE MOTIONS.*

GENUS I.—Catenated with Irritative Motions.

Sp. 1.	*Diabætes irritata*	Diabetes from irritation
2.	*Sudor frigidus in aſthmate*	Cold ſweat in aſthma
3.	*Diabætes a timore*	Diabetes from fear
4.	*Diarrhœa a timore*	Diarrhœa from fear
5.	*Pallor et tremor a timore*	Paleneſs and trembling from fear
6.	*Palpitatio cordis a timore*	Palpitation of the heart from fear
7.	*Abortio a timore*	Abortion from fear
8.	*Hyſteria a timore*	Hyſterics from fear.

GENUS II.—Catenated with Senſitive Motions.

Sp. 1.	*Nauſea idealis*	Nauſea from ideas
2.	——— *a conceptu*	Nauſea from conception
3.	*Vomitio vertiginoſa*	Vomiting from vertigo
4.	——— *a calculo in uretere*	——— from ſtone in the ureter
5.	——— *ab inſultu paralytico*	——— from ſtroke of palſy
6.	——— *a titilatione faucium*	——— from tickling the throat
7.	——— *cute ſympathetica*	——— from ſympathy with the ſkin.

Genus III.—Catenated with Voluntary Motions.

Sp. 1,	*Ruminatio*	Rumination
2.	*Vomitio voluntaria*	Voluntary vomiting
3.	*Eructatio voluntaria*	——— eructation.

Genus IV.—Catenated with External Influences.

Sp. 1.	*Catarrhus periodicus*	Periodical catarrh
2.	*Tuſſis periodica*	Periodic cough
3.	*Hyſteria a frigore*	Hyſterics from cold
4.	*Nauſea pluvialis*	Sickneſs againſt rain.

The Noſographie Philoſophique of Monſieur Pinel, and alſo the work of Ploucquet, we do not think of ſufficient merit to require a detail.

VIEW

OF THE

SYSTEM OF DR. CULLEN.

HAVING diſcuſſed theſe different Syſtems of Noſology, which we conſider as all faulty, in being too extended, and in having their diſtinctions often formed on opinion or theory rather than obvious fact, contrary to the general rules laid down—we ſhall, laſt of all, examine that of Dr. Cullen, as better adapted to views of practice, and as being alſo recommended by the greater ſimplicity of its arrangement.

This ſyſtem is divided into four general claſſes—of *pyrexiæ*, or diſeaſes of increaſed action; of *neuroſes*, or diſeaſes of deranged ſenſe and motion; of *cachexiæ*, or diſeaſes of depraved conſtitution; and of *locales*, or diſeaſes affecting but a part.

Theſe claſſes are again ſubdivided into their ſeveral orders and genera; and theſe ſub-diviſions are rendered more complete by ſynonymes explaining the connection of this with former ſyſtems, and with the moſt accurate hiſtories of diſeaſe by different authors.

This ſyſtem, therefore, we ſhall adopt, with ſuch alterations as experience leads us to prefer; omitting entirely the ſynonymes, as fit only for occaſional conſultation, not for the preſent work.

CLASS I.

I. DISEASES OF INCREASED ACTION (PYREXIÆ; ex πυρ, *fire*, and ἕξις, *habit*).

CHARACTER—Rigor of various duration; ſometimes, though rarely, wanting; ſucceeded by quickened pulſe and increaſed heat, interruption or diſorder of ſeveral functions, general diminution of ſtrength, particularly felt in the joints.

ORDER I. FEVERS (FEBRES).

Preceding and preſent debility. Pyrexia, no primary local diſeaſe.

§ 1. *Intermittents* (*Intermittentes*).

Fevers, the effect of marſh contagion, characteriſed by their number of paroxyſms never exceeding one in a day, ſucceeded again by ſtrong exacerbations, and in general by ſhivering.

Vide vol. I. p. 195.

GENUS I. *The Tertian Intermittent* (*Tertiana*).

The general intermittent character of attacking in paroxyſms, with an interval of about forty-eight hours: the acceſſions at noon.

The tertian is modified in its appearance by ſeveral circumſtances:

1. By its intermiſſion, or apyrexia, varying.

A. From the different length of its paroxyſms.

a. Not exceeding twelve hours.

b. Extending beyond twelve hours.

B. From the various returns of its paroxyſms.

a. Having a daily return of equal length, and ſimilar in their alternation.

b. Having one every ſecond day, and two paroxyſms on that day.

c. Having a return daily, with two paroxyſms one day, and one only the other.

d. Having a daily paroxyſm, with an intervening remiſſion, greater between the odd and even day than *vice verſa.*

C. From the different combinations of its ſymptoms.

a. Combined with a comatoſe, or drowſy, ſtate.

b. Combined with ſpaſmodic and convulſive appearances.

c. Combined with a cutaneous eruption or efflorescence.

D. From its connection with other diſeaſes.

E. From ſome difference in its cauſe or origin.

2. By its ſhowing a remiſſion only.

II. THE QUARTAN INTERMTTENT (QUARTANA.)

The general intermittent character, with an interval of about ſeventy-two hours, and afternoon acceſſions.

The quartan, like the tertian, is modified by different circumſtances.

1. By its intermiſſion varying.

A. In its type, or period.

a. By having ſimple paroxyſms every fourth day, and none in the intermediate ſpace or days.

b. By having two paroxyſms every fourth day, and none in the intermediate ſpace or days.

c. By having three paroxyſms every fourth day, and none in the intermediate ſpace or days.

d. By having only, of the four days, the third free from fever, with ſimilar paroxyſms every fourth day.

e. By having a daily attack, but the paroxyſms of the fourth day only alike.

B. In its ſymptoms.

C. In its complication with other diſeaſes,

2. By its remiſſion only varying.

III. THE QUOTIDIAN INTERMITTENT (QUOTIDIANA.)

The general intermittent character, with an interval of about twenty-four hours, and morning paroxyſms.

Its variety is diſplayed,

1. In its intermiſſion.

A. Being ſolitary or ſimple.

a. Univerſal, or recurring at the ſame morning hour.

b. Partial.

B. Being complicated with other diſeaſes.

2. In its remiſſion only.

§ 2. *Continued Fevers* (*Continuæ*).

Fevers continuing, and diſtinguiſhed by no intermiſſion; ariſing alſo from a different cauſe than intermittents; diſcovering various remiſſions and exacerbations, though not always ſtrongly marked; with two daily paroxyſms.

IV. INFLAMMATORY FEVER (SYNOCHA.)

Great increaſe of heat; pulſe accelerated, ſtrong, and hard; urine high-coloured; animal functions ſlightly affected.

Vide vol. I. p. 3.

V. LOW FEVER (TYPHUS).

Infectious; ſlight increaſe of heat; pulſe weak, ſmall, and in general accelerated; little change of urine; great diſturbance of animal functions; great proſtration of ſtrength.

The ſpecies or varieties are,

1. *The Spotted, or Petechial* (*Typhus Petechialis*).

a. The mild.

b. The malignant.

2. *The Jaundiced, or Yellow* (*T. Icterodes*).

Vide vol. I. p. 65, 113, 118.

VI. COMPOUND FEVER (SYNOCHUS).

Contagious; a compound of ſynocha and typhus, being marked at firſt by inflammatory ſymptoms, and afterwards by ſymptoms purely nervous.

Vide vol. I. p. 193.

Hectic Fever (*Hectica*).

Daily fever, with noon and evening acceſſions, morning remiſſions, rarely intermiſſions. In its progreſs, for the moſt part, nocturnal ſweats, and the urine depoſiting a caleritious ſediment.

ORDER II. INFLAMMATIONS.

PHLEGMASIÆ (ex φλεγμαινω, *I burn*).

Inflammatory fever, local inflammation, or phlogoſis and pain in a particular external place, with leſion of the function of ſome internal part: the blood, when drawn and concreted, covered with ſize.

VII. LOCAL INFLAMMATION (PHLOGOSIS; ex φλοξ, φλογος, *flame*).

Pyrexia; redneſs of ſkin, ſwelling, heat, and pain.

Vide vol. I. p. 5; and vol. II. p. 5.

The varieties are,

1. *The Phlegmonic Species (Phlegmone)*,

Or inflammation of a bright red colour, with a defined tumor, for the moſt part elevated to a point, often terminating in abſceſs, and marked with a throbbing pain.

It is diſtinguiſhed by,

a. The variety of its form.
b. The nature of the part affected.

2. *The Roſy Species (Erythema)*,

Or inflammation of a ruddy colour, vaniſhing on preſſure; an unequal and creeping circumference, with ſcarce any tumor, terminating in cuticular ſcales, puſtules, or veſicles; a ſenſe of burning pain.

It is diſtinguiſhed,

a. By its degree of violence or intenſity.
b. By its remote cauſe.
c. By its being complicated with other diſeaſes.

Local inflammation, or phlogoſis, is terminated by

1. *Impoſthume* (*Apoſtema*).

When the pain, throbbing, and pulſation, have ceaſed, and there ariſes a tumor of a clear ſhining appearance, whitiſh, itching, ſoft, and unfixed.

2. *Gangrene* (*Gangræna*).

When the part grows livid, duſkiſh, and of a leaden hue, loſing ſenſibility, turning ſoft, and having frequently watery veſicles on the ſurface.

3. *Mortification* (*Spacelus*).

When the parts become entirely black and flaccid, loſing all feeling and heat, attended with a fœtor and quick-ſpreading corruption.

VIII. INFLAMMATION OF EYE (OPHTHALMIA; ex οφθαλμος, *the eye.*)

Redneſs, pain, and ſwelling, of the eye; impatience of light; for the moſt part with effuſion of tears; ſometimes dryneſs of the organ.

Vide vol. I. p. 11; vol. II. p. 179; and vol. IV. p. 157.

The various ſpecies are,

§ 1. Idiopathic.

1. *The Inflammation of the Membranes* (*Ophthalmia Membranarum*),

Or inflammation in the tunica adnata, and the membranes lying under it, or in the coats of the eye.

It varies,

a. In the degree of the external inflammation.
b. In the various affection of the internal coats.

2. *Inflammation of the Lids* (*Ophthalmia Tarsi*),

With swelling, erosion, and glutinous exudation of the tarsus palpebrarum.

§ 2. Symptomatic.

a. From disease in the eye itself.

b. From diseases of the other parts, or of the whole body.

IX. PHRENSY (PHRENITIS; ex φρενιτις, *phrensy*).

Acute pyrexia; violent head-ache; a flushing of the face, and redness of eyes; impatience of light and noise; watchfulness; impetuous delirium.

Vide vol. I. p. 9.

X. AFFECTIONS OF THROAT (CYNANCHE; ex κυων, *a dog*, and αγχω, *to suffocate*.

Pyrexia, sometimes of the typhoid species; redness and pain of the fauces: deglutition and respiration difficult, with a sense of stricture in the throat.

The species are,

1. *Tonsillary Sore Throat* (*Cynanche Tonsillaris*),

Or heat, pain, and stricture, of the mucous membrane of the fauces, particularly the tonsils, which show a tumor and redness, with synocha. *Vide* vol. I. p. 13.

2. *Malignant Sore Throat* (*Cynanche Maligna*),

Affection of the tonsils and mucous membrane of the fauces, with swelling, deep redness, or creeping, and with mucous crusts, of a whitish or ash colour, covering ulcers of a shining crimson colour; joined with typhous fever and eruptions. *Vide* vol. I. p. 123.

3. *Croup* (*Cynanche Trachealis*).

Difficult wheezing reſpiration, inſpiration loud, voice hoarſe and ſtridulous, ſlight, and hardly any apparent ſwelling of the fauces, ſwallowing little impaired, fever inflammatory. *Vide* vol. I. p. 15; vol. IV. p. 85.

4. *Pharyngeal Sore Throat* (*Cynanche Pharyngea*).

Redneſs moſt prevalent at the bottom of the fauces; ſwallowing exceedingly difficult and painful; reſpiration unimpaired; fever inflammatory.

5. *Parotideal Sore Throat, or Mumps* (*Cynanche Parotidea*).

Great external ſwelling of the parotid and maxillary glands; reſpiration and deglutition little impeded, or hardly impaired, fever inflammatory, though generally ſlow, and mild. *Vide* vol. IV. p. 83.

XI. PNEUMONIC INFLAMMATION (PNEUMONIA; ex πνευμων, *the lungs*).

Pyrexia, very acute pain of cheſt, difficult reſpiration, cough.

The ſpecies are,

1. *Pneumonic Peripneumony* (*Pneumonia Peripneumonia*).

The pulſe ſoft; dull pain in the breaſt, little diffuſed; reſpiration always difficult, and often impoſſible, except in an erect poſture of the body; the face ſwoln and flushed, or of a purple colour; cough, in general, moiſt, often ſtreaked with blood.

Vide vol. I. p. 16.

The varieties of it are,

§ 1. The ſimple idiopathic.
2. The idiopathic complicated with fever.
3. The ſymptomatic.

2. *Pleuritic Peripneumony* (*Peripneumonia Pleuritis*).

Pulſe hard and full; pain, in general of the ſide, acute, particularly the right ſide, confined among the ribs, and increaſed, eſpecially at inſpiration; lying on the ſide troubleſome; very painful cough, at firſt dry, afterwards humid, and often bloody.

Vide vol. I. p. 20.

Its varieties are,

§ 1. The ſimple idiopathic.

2. The complicated,

a. With fever.

b. With catarrh.

3. The ſymptomatic.

4. The falſe.

The pneumonic inflammation ends in

VOMICA. After pneumonic inflammation not terminating in reſolution, conſtant difficult reſpiration and cough, uneaſy lying on the ſound ſide, and hectic fever.

EMPYEMA. After pneumonic inflammation ending in ſuppuration, or frequently after vomica, a remiſſion of pain, while the difficult reſpiration, cough, painful lying on the ſide, and hectic fever remain, often with a ſenſe of a fluid in the breaſt, and ſymptoms of hydrothorax.

Vide vol. II. p. 269.

XII. INFLAMMATION OF THE HEART (CARDITIS; ex *καρδια, the heart*).

Pyrexia, pain about or in the region of the heart, anxiety, difficult reſpiration, cough, unequal pulſe, palpitation, fainting.

It is either,

§ 1. Idiopathic; or,

2. Symptomatic.

XIII. PERITONÆAL INFLAMMATION (PERITONITIS; ex *περιτεινω, to ſtretch round*).

Pyrexia; pain in the belly, exaſperated by the erect poſture, and no peculiar marked ſymptoms of other abdominal inflammations.

Its variations are,

1. *The Proper Peritonitis (Peritonitis Propria)*,

Or affection of the membrane, as it ſurrounds the abdomen internally.

2. *The Omental Peritonitis (Omentalis)*,

Or, as it extends over the omentum.

3. *The Meſenteric Peritonitis (Meſenterica)*,

Or, as it extends over the meſentery.

XIV. INFLAMMATION OF STOMACH (GASTRITIS; ex *γαστηρ, the ſtomach*).

Typhoid pyrexia; anxiety; burning heat and pain in the epigaſtrium, or region of the ſtomach, aggravated by whatever is taken into the ſtomach; inclination to vomit, and the ingeſta immediately rejected; hiccup.

Vide vol. I. p. 22.

Its varieties are,

§ 1. The idiopathic.

a. From internal cauſes.

1. *The Phlegmonic Gaſtritis (Phlegmonodea)*,

With acute pain, and vehement pyrexia.

2. *The Erythematous Gaſtritis* (*Erythematica*),

With ſlight pain and fever, and with roſe, or eryſipelatous redneſs in the fauces.

§ 2. The ſymptomatic.

XV. INFLAMMATION OF INTESTINE (ENTERITIS; ex *εντερον, an inteſtine*).

Typhoid fever; pungent pain in the abdomen, fixed, and twiſting, as it were, acutely, round the navel; vomiting, obſtinate coſtiveneſs.

Vide vol. I. p. 24.

Its varieties are,

§ 1. The idiopathic.

1. *The Phlegmonic Enteritis* (*Phlegmonodea*),

Acute pain, vehement pyrexia, vomiting, and coſtiveneſs.

2. *The Erythematous Enteritis* (*Erythematica*),

Slight pain and fever, without vomiting, and with diarrhœa.

§ 2. Symptomatic.

XVI. INFLAMMATION OF LIVER (HEPATITIS; ex *ἡπαρ, the liver*).

Pyrexia; tenſion, and acute or obtuſe pain of the right hypochondrium, reaching to the clavicle and top of the right ſhoulder, painful and difficult lying on the left ſide; uneaſy reſpiration; dry cough; vomiting, hiccup.

1. *Acute.*

To be known by the above definition,

Vide vol. I. p. 26.

2. *Chronic.*

Where no ſigns, its preſence may be inferred from certain antecedent cauſes of hepatitis; from a ſenſe of fulneſs and weight in the right hypochondrium; from pain, more or leſs acute, felt in the ſame part; from pain upon preſſure of the right hypochondrium, or from lying on the left ſide; and, laſtly, from ſlight fever, with the above ſymptoms.

Vide vol. I. p. 30; and vol. II. p. 129.

XVII. INFLAMMATION OF SPLEEN (SPLENITIS; ex σπλην, *the ſpleen*).

Pyrexia; tenſion, heat, ſwelling, and pain, in the left hypochondrium, aggravated by preſſure, without any ſigns of nephritis.

XVIII. INFLAMMATION OF KIDNEY (NEPHRITIS; ex νεφρος, *a kidney*).

Pyrexia; pain in the region of the kidneys, often ſhooting along the courſe of the ureter, uninfluenced by motion or preſſure; frequent diſcharge of urine, either thin and without colour, or of a bright red; vomiting; numbneſs of the leg; retraction or pain of teſticle of the ſame ſide; not unfrequently vomiting or colic.

Vide vol. I. p. 30.

§ 1. Idiopathic Spontaneous.
2. Symptomatic.

XIX. INFLAMMATION OF BLADDER (CYSTITIS; *ex κυστις, a bag.*)

Pyrexia; ſwelling and pain in the hypogaſtrium; frequent and painful micturition, or its ſuppreſſion; teneſmus.

1. From internal cauſes.
2. From external cauſes.

Vide vol. I. p. 319; and vol. II. p. 307.

XX. INFLAMMATION OF WOMB (HYSTERITIS; ex *ὑστερα, the womb*).

Pyrexia; heat, tenſion, tumor, and fixed throbbing pain in the hypogaſtrium; pain in the mouth of the uterus, when touched; vomiting.

Vide vol. III. p. 279.

XXI. INFLAMMATION OF JOINTS (RHEUMATISMUS; ex *ῥευματιζω, to be infeſted with rheum*).

Pyrexia; wandering pain of the larger joints, following the courſe of the muſcles, or of the knees, joints, and elbows, increaſed by external heat, and ariſing from an evident and external cauſe.

The acute and common rheumatiſm is idiopathic.

It varies in its ſeat,

a. In the muſcles of the loins.
b. In the muſcles of the coxendix.
c. In the muſcles of the thorax.

Rheumatiſm is followed by

ARTHRODYNIA (ex *αρθρον, a joint,* and *οδυνη, pain*).

After acute rheumatiſm, a violent ſtrain, or ſubluxation, ſucceed pains in the joints or muſcles, aggravated on motion, more or leſs tranſient and alleviated by the warmth of the bed or other external heat; the joints weak, rigid, eaſily and often ſpontaneouſly growing cold; no pyrexia, and ſeldom any tumor.

Vide vol. I. p. 32.

The Lumbago and Iſchias, though ſometimes acute diſeaſes, are moſt commonly chronic; and they in general belong to this diviſion.

XXII. ODONTALGIA.

Rheumatiſm, or arthrodynia of the jaw, from caries in the teeth.

Vide vol. I. p. 211; and vol. II. p. 233.

XXIII. GOUT (PODAGRA; ex *πους, the foot,* and *αγρα, a ſeiſing*).

Hereditary; no apparent external cauſe, but preceded, for the moſt part, by an unuſual affection of the ſtomach; pyrexia; pain of a joint, generally of the great toe, and particularly infeſting the articulations of the feet and hands: returning at intervals, and often alternating with affections of the ſtomach, or other internal parts.

Vide vol. I. p. 35.

The varieties of gout are,

1. *The Regular Gout (Podagra Regularis),*

Acute inflammation of the joints, of ſeveral days continuance, and gradually departing with ſwelling, itching, and deſquamation of the part affected.

2. *The Atonic Gout* (*Podagra Atonica*).

Debility of the ſtomach, or other internal part, and either without the expected or uſual inflammation of the joints, or with ſlight and fugacious pain in them; with dyſpepſia, or other ſymptoms of debility, often quickly alternating.

3. *The Retrograde Gout* (*Podagra Retrograda*),

With inflammation of the joints ſuddenly diſappearing, followed immediately by debility of the ſtomach, or of ſome other internal part.

4. *The Wandering Gout* (*Podagra aberrans*),

With inflammation of ſome internal part, preceded, or not preceded, by inflammation of the joints, which quickly diſappears.

The gout is ſometimes accompanied with other diſeaſes.

XXIV. ARTHROPUOSIS (ex αρθρον, *a joint*, and πυοσις, *ſuppuration*).

Deep, obtuſe, and long-continued pains of the joints, or muſcular parts, often from contuſion; no ſwelling, or a ſlight diffuſed one; no inflammation; fever, at firſt ſlight, afterwards of the hectic kind, with abſceſs of the part.

Vide vol. II. p. 136.

ORDER III. ERUPTIONS.

EXANTHEMATA (ex εξανθεω, *I efflorescе*).

Contagious diſeaſes, diſtinguiſhed by their attack only once in life; commencing with fever; diſplaying, at a certain time, eruptions, or phlogoſes, of various appearance, often numerous and ſmall, ſcattered over the ſkin.

XXV. SMALL-POX (VARIOLA).

Contagious inflammatory fever, with vomiting and pain, excited by preſſure of the epigaſtrium.

The eruption of ſmall red pimples begins on the third and ends on the fifth day, which pimples, in the courſe of eight days, ſuppurate, and at laſt fall off in cruſts, leaving often depreſſed ſcars, or little pits, in the ſkin.

Vide vol. I. p. 41; and vol. IV. p. 100.

The ſpecies, or varieties, are,

1. *The diſtinct Small-Pox* (*Variola diſcreta*),

With few puſtules, and theſe diſtinct or ſeparate, with circular margins, turgid and full; the fever ceaſing upon appearance of the eruption.

2. *The confluent Small-Pox* (*Variola confluens*),

With numerous puſtules, confluent, or intermixed with irregular margins, flaccid, with little elevation; the fever continued and increaſed by the eruption.

XXVI. CHICKEN-POX (VARICELLA).

Synocha; pimples breaking out after a ſhort and ſlight fever, which form puſtules like thoſe of the ſmall-pox, but ſeldom ſuppurate; ending in a few days in cruſts, without leaving any ſcar.

Vide vol. I. p. 45; and vol. IV. p. 109.

XXVII. MEASLES (RUBEOLA).

Infectious inflammatory fever, with ſneezing, defluxion of thin water from the eyes, dry and hoarſe cough.

On the fourth day, or a little later, appear ſmall cluſtering pimples, hardly elevated; and after three days they depart, in a ſmall mealy or branny deſquamation.

Vide vol. I. p. 47; and vol. IV. p. 106.

1. *The common Meaſles* (*Rubeola vulgaris*; ex *rubeo*, *I become red*),

With ſmall confluent cluſtering pimples, hardly elevated.

It is diſtinguiſhed,

a. By the ſymptoms being more ſevere, and a leſs regular courſe.

b. By being accompanied with cynanche.

c. By being accompanied by a putrid habit, or diatheſis.

2. *The Pocky Meaſles* (*Rubeola variolodes*),

With diſtinct and elevated pimples.

XXVIII. SCARLET FEVER (SCARLATINA).

Contagious inflammatory fever.

On the fourth day of the diſeaſe, the face becomes a little ſwelled: a florid redneſs, in large ſpots, afterwards coaleſcing, ſpreads over the ſkin, and in three days goes off in furfuraceous or branny ſcales; often ſucceeded by anaſarca.

Vide vol. I. p. 49; and vol. IV. p. 115.

Its ſpecies are,

1. *The ſimple Scarlet Fever* (*Scarlatina ſimplex*);

Not accompanied with affection of throat, or cynanche.

2. *The Cynanchical Scarlet Fever* (*Scarlatina Cynanchica*);

With ulcerous ſore throat, or cynanche.

XXIX. PLAGUE (PESTIS).

Very contagious nervous fever, marked by extreme debility.

On an uncertain day of the diſeaſe appears an eruption of buboes or carbuncles, on different parts.

Vide vol. I. p. 115.

The diſeaſe varies in degree.

XXX. ERYSIPELAS (ex ἐρυσιβη, *the ruſt of iron*).

Inflammatory fever of two or three days; in general with drowſineſs, often with delirium.

On ſome part of the ſkin, but oftenеſt on the face, there is an erythematous inflammation (*phlogoſis erythema*).

Vide vol. I. p. 39; and vol. IV. p. 37.

Its varieties are,

1. *The veſicular Roſe* (*Eryſipelas veſiculoſum*),

With erythema, redneſs ſpreading, occupying a broad ſpace, and terminating in ſome places in large bliſters.

2. *The pimply Roſe* (*Eryſipelas phlyctænodes*),

With erythema from many pimples, chiefly occupying parts of the trunk of the body, and quickly terminating in puſtules or ſmall bliſters.

XXXI. MILIARIA.

Synochus, anxiety, frequent ſighing, unctuous ſweats, and a ſenſe of pricking, as of pin-points, in the ſkin.

Vide vol. III. p. 284; and vol. IV. p. 117.

On an uncertain day of the diſeaſe, break out ſmall, red, diſtinct, but crowded, pimples, over the whole ſkin, except the face; on the top of which pimples, after a day or two, appear very ſmall white veſicles, remaining but a ſhort time.

XXXII. NETTLE-RASH (URTICARIA; ex *urtica, a nettle*).

Quotidian fever.

Vide vol. IV. p. 96.

On the ſecond day, reddiſh ſpots, reſembling the ſtinging of nettles, vaniſhing almoſt during the day, but returning at night with fever, and in a few days totally going off in very minute ſcales.

XXXIII. VESICULAR FEVER (PEMPHIGUS; ex *πεμφιξ, πεμφιγος, a puſtule*).

Contagious nervous fever.

On the firſt, ſecond, or third day, bliſters break out in ſeveral places, of the ſize of a ſloe or hazel-nut, which remain for ſeveral days, and then pour out a thin ichor.

XXXIV. THRUSH (APHTHA; ex *απτω, I kindle*).

Synochus.

The tongue ſomewhat ſwelled, and of a purple or livid colour, as well as the fauces; ſmall ſpecks, or eſchars, at firſt appear on the fauces and margins of the tongue, and afterwards cover the whole internal ſurface of the mouth; they are whitiſh, ſometimes ſcattered, but often coaleſcing; when rubbed off, quickly growing again, and remaining for an indeterminate time.

Vide vol. I. p. 125; and vol. IV. p. 39.

ORDER IV. HÆMORRHAGES.

(HÆMORRHAGIÆ; ex *αἱμορραγεω, I throw out blood.*)

Pyrexia, with a diſcharge of blood without any external cauſe or violence; the blood, on veneſection, appearing as in the caſes of inflammations, that is, the gluten with a ſeparation of ſize, or a cruſt formed.

XXXV. BLEEDING AT THE NOSE (EPISTAXIS).

Pain, weight, or a ſenſe of fulneſs, in the head; redneſs of the face; effuſion of blood from the noſe.

Vide vol. I. p. 51; vol. II. p. 214; and vol. IV. p. 167.

§ 1. *The Idiopathic.*

Varying according to the age of the patient.

a. The Epiſtaxis of Youth (Epiſtaxis Juniorum),
With ſigns of arterial plethora.

b. The Epiſtaxis of Age (EpiſtaxisSenum),
With ſigns of venous plethora.

§ 2. *The Symptomatic.*

a. From internal cauſes.
b. From external cauſes.

XXXVI. SPITTING OF BLOOD (HÆMOPTYSIS; ex *αἱμα, blood,* and *πτυω, to ſpit*).

Redneſs of the cheeks; ſenſe of uneaſineſs, pain, or heat, in the cheſt; difficult reſpiration; irritation of the fauces; blood of a florid colour and ſaltiſh taſte, often frothy, brought up by coughing, or hawking.

Vol. I. p. 52.

§ 1. *The Idiopathic.*

1. *The Plethoric Species* (*Hæmoptyſis Plethorica*),

Appearing without any external cauſe, previous cough, or ſuppreſſion of any cuſtomary evacuation.

2. *The Species from Violence* (*Hæmoptyſis Violenta*),

Occurring on the application of external violence or injury.

5. *The Phthiſical Species* (*Hæmoptyſis Phthiſica*),

Commencing after long-continued cough, with waſting and debility.

4. *The Calculous Species* (*Hæmoptyſis Calculoſa*);

With ſpitting up of ſmall calculous particles, often of a calcareous nature.

5. *The Vicarious Species* (*Hæmoptyſis Vicaria*),

Occurring after the ſuppreſſion of ſome accuſtomed evacuation.

§ 2. *The Symptomatic.*

The conſequence of hæmoptyſis is for the moſt part

Conſumption (*Phthiſis*),

Emaciation, or waſting debility; cough; hectic fever; and, in general, purulent expectoration.

Vide vol. I. p. 125.

The ſpecies and varieties of conſumption are,

1. *The Incipient Conſumption* (*Phthiſis Incipiens*),
Attended with no expectoration of pus.

2. *The Confirmed Conſumption* (*Phthiſis Confirmata*),
Marked by an expectoration of pus.

Both kinds are varied,

a. In reſpect to their remote cauſe.
b. In reſpect to the ſource of the matter or pus.

XXXVII. PILES (HÆMORRHOIS; ex *αἱμα, blood*, and *ῥεω, to flow*).

Senſe of weight or pain in the head; vertigo; pain in the loins, and heat and fullneſs about the anus; round the anus livid painful tubercles, diſcharging for the moſt part blood; which likewiſe ſometimes, without any apparent tumor, flows from within the anus.

Vide vol. I. p. 54; vol. II. p. 324.

The varieties of this diſeaſe are,

1. *The Tumid Piles* (*Hæmorrhoïs Tumens*),
From external ſwellings, with

a. Bloody diſcharge.
b. Mucous diſcharge.

2. *The Falling-down, or Procidental Piles* (*Hæmorrhoïs Procidens*),
From protruſion of the anus.

3. *The Flowing Piles* (*Hæmorrhoïs Fluens*).
Internal, with no external tumor, or protruſion of the anus.

4. *The Blind Piles* (*Hæmorrhoïs Cæca*),

With pain and tumor of the anus, and no effusion of blood.

XXXVIII. EXCESS OF MENSES (MENORRHAGIA; ex *μην, a month,* and *ῥαγας, a rupture*).

Pains in the back, loins, and belly, bearing down, or like those of child-birth; the menses exceeding the monthly flow in quantity, frequency, or duration.

Vide vol. I. p. 56; vol. III. pp. 34, 73, and 267.

The varieties are,

1. *The Excess of Bloody Discharge* (*Menorrhagia Rubra*),

In women not pregnant, nor in child-bed. Or,

2. *The Abortive or Bloody Discharge* (*Menorrhagia Abortus*),

Of pregnant women.

3. *The Lochial or Bloody Discharge* (*Menorrhagia Lochialis*),

Of women in child-bed.

4. *The Bloody Partial Discharge* (*Menorrhagia Vitiorum*),

From organic lesion, or local disease.

5. *The Whites* (*Menorrhagia Alba*).

Serous, without local affection, in women not pregnant.

6. *The Whites* (*Menorrhagia Nabothi*).

Discharge serous in pregnant women.

The following discharges are for the most part, if not always, symptomatic.

The *Stomace*, or bloody discharge from the gum.

The *Hæmatemesis*, or blood from the stomach, which is in general vicarious of an accustomed hæmorrhage, or symptomatic of local disease of the stomach, or of what is called the morbus niger, or lastly of external violence.

The *Hæmaturia*, or discharge of blood from the kidneys, is generally symptomatic of calculus in the kidneys, and sometimes of putrid fevers.

The *Cystirrhagia*, or discharge of blood from the bladder, which is in general symptomatic of calculus in the bladder, more rarely of other disease there.

Order V. Increased white Discharges (Profluvia).

Pyrexia, increased morbid excretion, without blood, as a primary part.

XXXIX. CATARRH (CATARRHUS; ex καταῤῥεω, *to flow down*).

Pyrexia often contagious; morbid and increased excretion of mucus, from the glands of the membrane of the nose, fauces, or bronchia; or tendency to such increased morbid excretion.

Vide vol. I. p. 59.

Its varieties are,

1. Catarrh from cold.
2. Catarrh from contagion.

XL. DYSENTERY (DYSENTERIA; ex δυς, *bad*, εντερον, *an intestine*, and ῥεω, *to flow*.

Contagious pyrexia; frequent mucous or bloody stools, the fæces being for the most part retained; gripes; constant urgent desire.

Vide vol. I. p. 61.

Its varieties depend,

a. On its being accompanied with worms.

b. On the dejection of ſmall maſſes of a fleſhy or ſebaceous matter.

c. On being accompanied with an intermittent fever.

d. On being without blood.

e. On being accompanied with miliary fever.

CLASS II.

NEUROSES.

Morbid ſtate of ſenſe and motion, without primary pyrexia, or without local affection.

ORDER I. COMATA.

The voluntary motions impaired, with ſleep, or a ſuſpenſion of ſenſe.

XLI. APOPLEXY (APOPLEXIA; ex *αποπλησσω, to ſtrike down ſuddenly*).

Vide vol. I. pp. 69 and 168.

The whole of the voluntary motions in ſome degree aboliſhed, with ſleep, more or leſs profound, the action of the heart and arteries continuing.

The ſpecies of idiopathic apoplexy are,

1. Apoplexia *ſanguinea*, with ſigns of univerſal plethora, and chiefly of the head.

2. Apoplexia *ſeroſa*, occurring for the moſt part in the leucophlegmatic bodies of old men.

3. Apoplexia *hydrocephalica*, coming on by degrees; affecting infants and children, firſt with laſſitude, a degree of fever and headach; afterwards with ſlow pulſe, dilatation of the pupil, and drowſineſs.

4. Apoplexia *atrabilaria*, in a perſon of a melancholic temperament.

5. Apoplexia *traumatica*, from external violence applied to the head.

6. Apoplexia *venenata*, from ſedatives internally or externally adminiſtered.

7. Apoplexia *mentalis*, from affections of the mind.

8. Apoplexia *cataleptica*, the muſcles obeying the motion of the joints, when influenced by force externally applied.

9. Apoplexia *ſuffocata*, from ſuffocation by ſomething external.

Apoplexia is frequently ſymptomatic

a. Of intermittent fever.

b. Of continued fever.

c. Of phlegmaſia.

d. Of exanthema.

e. Of hyſteria.

f. Of epilepſy.

g. Of gout.

h. Of worms.

i. Of ſuppreſſion of urine.

k. Of ſcurvy.

XLII. PARALYSIS (ex παραλυσις, *a palſy*).

Some only of the voluntary motions impaired, often with ſleep.

Vide vol. I. p. 71.

§ 1. *Idiopathic.*

1. Paralyſis *partialis*, of ſome only of the muſcles.

2. Paralyſis *hemiplegica*, of one ſide of the body.

It varies in regard to the habit of body.

a. Hemiplegia in a plethoric habit.

b. Hemiplegia in a leucophlegmatic habit.

3. Paralyſis *paraplegica*, of one half of the body taken tranſverſely.

4. Paralyſis *venenata*, from ſedatives, applied either internally or externally.

§ 2. *Symptomatic.*

Tremor, as being always ſymptomatic, I cannot admit into the number of genera; but the ſpecies enumerated by Sauvages, according as they ſeem to me to be ſymptoms either of aſthenia or paralyſis, I ſhall ſubjoin.

TREMOR; alternate and frequent motion of a joint to and fro.

1. Aſthenic ſpecies.

2. Paralytic ſpecies.

3. Convulſive ſpecies.

ORDER II. ADYNAMIÆ.

The involuntary motions, whether vital or natural, impaired.

XLIII. FAINTING (SYNCOPE; ex *συγκοπτω, to fall down*).

Action of the heart diminiſhed, or for a time ſuſpended

§ 1. *Idiopathic.*

1. Syncope *cardiaca*, often returning without apparent cauſe, with vehement palpitation of the heart at intervals: *From affection of the heart or neighbouring veſſels.*

2. Syncope *occaſionalis*, originating from an evident cauſe: *From affection of the whole ſyſtem.*

§ 2. *Symptomatic*

Of diſeaſes, either of the whole ſyſtem, or of other parts, except the heart.

XLIV. DYSPEPSIA (ex δυς, *bad*, and πεπτω, *to conduct*).

Loſs of appetite, nauſea, vomiting, flatulence, eructation, rumination, heartburn, pain in the ſtomach, at leaſt ſome or more of theſe at once occurring, generally with coſtiveneſs, and without any other diſeaſe either of the ſtomach or other parts.

Vide vol. I. p. 94.

§ 1. *Idiopathic.*

§ 2. *Symptomatic.*

1. From diſeaſe of the ſtomach itſelf.

2. From diſeaſe of other parts, or of the whole body.

XLV. HYPOCHONDRIASIS (ex ὑπο, *under*, and χονδρια, *a cartilage*).

Dyſpepſia, with languor and dejection of mind; a ſenſe of fear, ariſing from inadequate cauſes, confined to perſons of a melancholic temperament.

Vide vol. I. p. 100.

There is but one idiopathic ſpecies.

XLVI. CHLORORIS (ex χλωριζω, *to look green*).

Dyſpepſia, or deſire to eat things unalimentary; paleneſs or diſcoloration of the ſkin; defect of blood in the veins, with œdematous ſwelling of the body; debility; palpitation; retention of the menſes.

Vide vol. I. p. 102.

ORDER III. SPASMI (ex σπασμος, *the cramp*).

Irregular motions of the muſcles, or muſcular fibres.

§ 1. *In the Animal Functions.*

XLVII. TETANY (TETANUS; ex τεινω, *to ſtretch*).

Spaſmodic rigidity of ſeveral muſcles.

Vide vol. I. p. 75.

It varies,

a. In degree, as in the half or whole of the body being affected with ſpaſms.

b. In reſpect of its remote cauſes; as it ariſes either from an internal cauſe, from cold, or from a wound.

c. In reſpect of the part of the body affected.

XLVIII. LOCK JAW (TRISMUS; ex *trismus, a grating noiſe*).

Spaſtic rigidity, chiefly of the lower jaw.

Vide vol. I. p. 75.

1. *The Lock Jaw of Infancy* (*Triſmus Naſcentium*),

Attacking infants during the two firſt weeks from their birth.

Vide vol. I. p. 77; and vol. IV. p. 44.

2. *The Lock Jaw from a Wound* (*Trismus Traumaticus*),

Attacking persons of all ages, and arising from cold or a wound.

Vide vol. II. p. 27.

XLIX. CONVULSION (CONVULSIO; ex *convolio, to pull together*).

Irregular and unnatural contraction of the muscles, without sleep.

Vide vol. IV. p. 43 and 59.

§ 1. The idiopathic.
2. The symptomatic.

L. CHOREA (ex χορεια, *a dance*).

Attacking young persons of both sexes, in general from ten to fourteen years of age, with convulsive motions partly voluntary, for the most part of one side, the motion of the arms and hands resembling the gesticulation of mountebanks; in walking, one foot is rather dragged than lifted.

Vide vol. I. p. 78.

LI. RAPHANIA (ex ῥαφανος, *a radish*).

Spasmodic contraction of the joints, with convulsive motions, very violent pain, periodical.

LII. EPILEPSIA (ex *epilepsis, a swoon*).

Convulsion of the muscles, with sleep.

Vide vol. I. p. 72.

¶ 1. *The Idiopathic.*

1. Epilepsia *cerebralis*, suddenly coming on without manifest cause; not preceded by any troublesome sensation, unless perhaps of vertigo or dimness of sight.
2. The sympathetic Epilepsy *(Epilepsia Sympathica)*, without manifest cause; but preceded by the sensation of a certain aura rising from some part of the body to the head.
3. The occasional Epilepsy *(Epilepsia occasionalis)*, arising from manifest irritation, and ceasing when the irritation is removed.

This varies from the diversity of the irritating cause; as,

a. From injury done to the head.
b. From pain.
c. From worms.
d. From poison.
e. From cutaneous eruptions, or other effusion of acrid humours, repelled.
f. From crudity in the stomach.
g. From affection of mind.
h. From excess of hæmorrhage.
i. From debility.

¶ 2. *The Symptomatic.*

§2. *In the Vital Functions.*

In the action of the heart.

LIII. PALPITATIO.

Violent and irregular motion of the heart.

¶ 1. *The Idiopathic.*

¶ 2. *The Symptomatic.*

In the action of the lungs.

LIV. ASTHMA (ex ασθμαζω, *to breathe with difficulty*).

Difficult respiration recurring at intervals, with a sense of stricture or tightness in the breast; wheezing respiration; difficult cough at the beginning of the fit, sometimes none, free towards the end; and often with copious spitting of mucus.

Vide vol. I. p. 79.

¶ 1. *The Idiopathic.*

1. The spontaneous Asthma (*Asthma spontaneum*), without manifest cause, or being accompanied with any other disease.
2. The exanthematic Asthma (*Asthma exanthematicum*), from an eruption or acrid effusion repelled.
3. The plethoric Asthma (*Asthma plethoricum*), from suppression of any usual evacuation of blood, or from spontaneous plethora or fulness.

¶ 2. *The Symptomatic.*

LV. DYSPNŒA (ex δυς, *bad*, and πνεω, *to breathe*).

Continual difficult respiration, with fulness and obstruction of breast, not with sense of stricture. Cough frequent through the whole course of the disease.

¶ 1. *Idiopathic.*

1. The catarrhal Dyspnœa (*Catarrhalis*), with frequent cough, bringing up a copious viscid mucus.
2. The dry Dyspnœa (*Sicca*), with cough for the most part dry.

3. Dyſpnœa from ſtate of atmoſphere (*aërea*), increaſed by every the leaſt change in the weather.

4. Dyſpnœa from earthy matter (*terrea*), the cough bringing up an earthy or calculous ſubſtance.

5. The watery Dyſpnœa (*aquoſa*); the urine in ſmall quantity, ſwelling of the feet, without fluctuation in the breaſt, or other characteriſtic ſigns of water in the cheſt.

6. The Dyſpnœa from fat (*pinguedinoſa*), in very fat perſons.

7. The thoracic Dyſpnœa (*thoracica*), from the parts incloſing the thorax being hurt or ill formed.

8. The external Dyſpnœa (*extrinſeca*), from manifeſt external cauſes.

¶ 2. *The Symptomatic.*

1. Of diſeaſes of the heart, or larger veſſels.

2. Of abdominal tumor.

3. Of various diſeaſes.

LVI. CHINCOUGH (PERTUSSIS).

Contagious; convulſive, ſuffocating cough, with a loud noiſe, called *hooping*, at each inſpiration; often with vomiting.

Vide vol. I. p. 81; vol. IV. p. 89.

§ 3. *In the Natural Functions.*

LVII. PYROSIS (ex πυρωσις, *a burning*).

Burning heat in the epigaſtrium, with copious eructations of an aqueous humour, for the moſt part inſipid, but ſometimes acrid.

Vide vol. I. p. 82.

¶ 1. The idiopathic.

2. The ſymptomatic.

LVIII. COLIC (COLICA; ex *colon*, the gut of that name).

Pain in the lower belly, chiefly with a ſenſe of twiſting or wringing round the navel; vomiting; coſtiveneſs.

Vide vol. I. pp. 84, 87; and vol. IV. p. 46.

¶ 1. *The Idiopathic.*

1. The ſpaſmodic Colic (*Colica Spaſmodica*), with refraction of the navel and ſpaſms of the abdominal muſcles.

It is varied by the ſymptoms attending it.

a. With vomiting of ſtercoraceous matter, or of things injected by the anus.

b. With inflammation.

2. The Devonſhire, or Poitou, Colic (*Colica Pictonum*); preceded by a ſenſe of weight or uneaſineſs in the lower belly, chiefly round the navel; followed by colic pain, at firſt ſlight, not continual, and generally increaſed after meat; at length more ſevere and almoſt perpetual; with pain of the arms and back, ending at laſt in palſy.

It is varied; the difference in its remote cauſe.

a. Being the effect of metallic poiſon.

b. Of acids in the inteſtines.

c. From cold.

d. Of contuſion of the back.

3. The ſtercoraceous Colic (*Colica ſtercoracea*), in perſons ſubject to coſtiveneſs, after long continued conſtipation.

4. The accidental Colic (*Colica accidentalis*), from acrid matter in the inteſtines.

5. The meconial Colic (*Colica meconialis*), in new-born children, from retention of the meconium.

6. The Colic from Callus (*Colica calloſa*), with a ſenſe of conſtriction in ſome part of the inteſtines, and often previouſly of collected flatus, with ſome pain, which flatus gradually goes off; the belly is coſtive, and at laſt the fæces are diſcharged only in a liquid ſtate, and in ſmall quantity.

7. The Colic from calculus (*Colica calculoſa*), with a fixed hardneſs in a particular part of the abdomen; calculi ejected by the anus.

¶ 2. *The Symptomatic.*

LIX. CHOLERA (ex χολη, *bile*, and ῥεω, *to flow*).

Evacuation of bilious matter in both directions; anxiety; gripes; ſpaſms of the legs.

Vide vol. I. p. 83.

¶ 1. *The Idiopathic.*

1. The ſpontaneous Cholera (*ſpontanea*), occurring in warm weather, without manifeſt cauſe.

2. The accidental Cholera (*accidentalis*), from acrid matters in the ſtomach or inteſtines.

¶ 2. *The Symptomatic.*

LX. LOOSENESS (DIARRHŒA; ex διαῤῥεω, *I flow through*).

Frequent purging; the diſeaſe not contagious; no primary fever.

Vide vol. I. p. 89; and vol. IV. p. 51.

¶ 1. *The Idiopathic.*

1. From exceſs or dilatation (*Diarrhœa crapuloſa*); the fæces diſcharged in a more liquid ſtate than is natural, and in greater quantity.

2. The bilious Diarrhœa (*bilioſa*); a great quantity of yellow fæces diſcharged.

3. The mucous Diarrhœa (*mucoſa*); copious diſcharge of mucus, the conſequence of acrid matters taken in, or of cold, eſpecially applied to the feet.

4. The cœliac Diarrhœa (*Diarrhœa cœliaca*), with diſcharge of a milky fluid, like chyle.

5. The lienteric Looſeneſs (*Diarrhœa lienteria*), with the food quickly diſcharged without any material change.

6. The hepatic Looſeneſs (*Diarrhœa hepatirrhœa*), with diſcharge of a bloody matter like ſerum, without pain.

¶ 2. *The Symptomatic.*

LXI. MORBID FLOW OF URINE (DIABETES; ex δια, *through*, and βαινω, *to paſs*).

An immoderate chronic diſcharge of urine, in general unlike the natural.

Vide vol. I. p. 92.

¶ 1. *The Idiopathic.*

1. *The honey-like Diabetes* (*mellitus*), with urine of the ſmell, colour, and taſte, of honey.

2. The inſipid Diabetes (*inſipidus*), with limpid urine not ſweet.

¶ 2. *The Symptomatic.*

LXII. HYSTERIA; (ex ὑστερα, *the womb*).

Rumbling noiſe of the bowels; the feeling of a ball rolling itſelf in the abdomen, riſing towards the ſtomach and gullet, and there giving a ſenſe of ſtrangulation; ſleep; convulſions; copious diſcharge of limpid urine; the mind involuntarily, various, and unſteady.

Vide vol. I. p. 97.

It varies according to the remote cauſe; as,

a. From retardation of the menſes.

b. From exceſſive diſcharge of the menſes, bloody.

c. From exceſſive diſcharge of the menſes, ſerous, or fluor albus.

d. From viſceral obſtruction.

e. From diſeaſe of the ſtomach.

f. From exceſſive luſt.

LXIII. HYDROPHOBIA (ex ὑδωρ, *water*, and φωβεω, *I dread*).

Loathing and horror of liquids, as exciting painful convulſion of the pharynx, generally proceeding from the bite of a mad animal.

Vide vol. I. p. 110.

1. The furious or rabid Hydrophobia (*rabioſa*), with deſire of biting, from the bite of a rabid animal.

2. The ſimple Hydrophobia (*ſimplex*), without rage, or inclination to bite.

ORDER IV. VESANIÆ (ex *Vesania, Madness*).

Impaired judgment, no fever or coma.

LXIV. WANT OF MIND (AMENTIA; ex *a*, from, and *mens*, the mind).

Weakness of judgment, incapable of perceiving or remembering the relations of things.

1. The congenite Amentia (*congenita*), continuing from birth.

2. The Amentia of age (*senilis*), from decay of perception and memory in old age.

3. The acquired Amentia (*acquisita*), induced by evident external causes in men of sound judgment.

LXV. MELANCHOLIA (ex μελας, *black*, and χολη, *bile*).

Vide vol. I. p. 105.

Partial insanity, no dyspepsia.

Varied according to the different subjects inducing it; as,

a. From false perception of the state of the patient's health, conceived to be dangerous from slight causes; or from despondence with regard to the state of his affairs.

b. From false perception of the prosperous state of the patient's affairs.

c. From vehement love, but without satyriasis or nymphomania.

d. From superstitious fear of the future.

e. From aversion to motion and all the offices of life.

f. From inquietude and impatience in every ſituation.

g. From wearineſs of life.

h. From falſe conception of the nature of the perſon's ſpecies.

LXVI. MADNESS (MANIA).

Univerſal inſanity.

Vide vol. I. p. 105.

1. The mental Mania *(mentalis)*, ariſing from affection of the mind.

2. The corporeal Mania *(corporea)*, ariſing from evident corporeal derangement.

Which varies alſo according to the diverſity of the diſeaſe.

3. The obſcure Mania *(obſcura)*, preceded by no paſſion of the mind, or evident bodily derangement.

The ſymptomatic ſpecies of Mania are,

The Paraphroſyne of Sauvages and Sagar.

a. From poiſons.

b. From paſſion.

c. From fever.

LXVII. ONEIRODYNIA (ex ονειρος, *a dream*, and οδυνη, *anxiety*).

Inflamed or diſturbed imagination during ſleep.

1. The active Oneirodynia *(activa)*, inciting perſons to walking and to various motions.

2. The oppreſſive Oneirodynia *(gravans)*, with a ſenſe of incumbent weight generally oppreſſing the breaſt.

CLASS III.

CACHEXIÆ.

Depraved ſtate of the whole, or a conſiderable part, of the body; without fever or nervous affection; conſtituting a primary part of the diſeaſe.

Order I. Wastings (Marcores).

Emaciation of the whole body.

LXVIII. CONSUMPTION (TABES).

Emaciation, loſs of ſtrength, hectic fever.

1. The purulent Conſumption (*Tabes purulenta*), proceeding from ulcer either external or internal, or from abſceſs of the lungs, and varying according to its particular ſeat.

2. The ſcrofulous Conſumption (*Tabes ſcrofuloſa*), in ſcrofulous ſubjects.

3. The poiſoned Conſumption, (*Tabes venenata*), proceeding from poiſon.

LXIX. ATROPHY (ATROPHIA; ex α, priv. and τροφη, *nutrition*).

Emaciation, loſs of ſtrength, no hectic fever.

1. The Atrophy from fluid profuſion (Atrophia *inanitorum*), or from exceſſive evacuation.

2. The Atrophy from ſtarvation (Atrophia *famelicorum*), or defect of nouriſhment.

3. The Atrophy from bad habit (Atrophia *cacochymica*), or corrupted food.

4. The Atrophy from weakneſs (Atrophia *debilium*), or from a depraved ſtate of the function of nutrition, without previous or exceſſive evacuation, or depraved ſtate of the humours.

ORDER II. INTUMESCENTIÆ.

External ſwelling of the whole, or of a conſiderable part, of the body.

§ 1. *ADIPOUS (ADIPOSÆ).*

LXX. EXCESS OF CORPULENCE (POLYSARCIA; ex πολυς, *much*, and σαρξ, *fleſh*).

Troubleſome ſwelling, depending on the increaſe of oil in the cellular texture of the body.

§ 2. *FLATULENT (FLATUOSÆ).*

LXXI. PNEUMATOSIS (ex πνευματοω, *to fill with wind.*)

Swelling of the body, diſtended, elaſtic, and crackling on the touch.

1. The ſpontaneous Pneumatoſis (*ſpontanea*), ariſing without evident cauſe.

2. Pneumatosis *traumatica*, or from a wound in the thorax.

3. Pneumatosis *venenata*, or from poison internally or externally applied.

4. Pneumatosis *hysterica*, or combined with hysteria.

LXXII. TYMPANY (TYMPANITES; ex τυμπανιζω, *to sound like a drum*).

Vide vol. I. p. 219.

Swelling of the abdomen, tense, elastic, and sounding on being struck; costiveness; emaciation of the other parts.

1. The intestinal Tympany (*Tympanites intestinalis*), generally with unequal tumour of the abdomen, with frequent discharge of wind, which gives relief to the pain and tension.

2. The abdominal Tympany (Tympanites *abdominalis*). more sensibly resounding on the touch, the tumour more equal, the emission of wind less frequent, and giving less relief than in the former species.

LXXIII. PHYSOMETRA (ex φυσιοω, *to inflate*, and μητρα, *the womb*).

Slight elastic tumour in the hypogastrium, resembling in figure and seat the womb.

§ 3. *DROPSIES, or AQUOSÆ.*

LXXIV. ANASARCA (ex ανα, *along*, and σαρξ, *flesh*).

Soft unelastic swelling of the whole, or part, of the body.

Vide vol. I. p. 167.

1. Anasarca *serosa*, proceeding from a retention of serum on the suppression of some accustomed evacuation; or from an increase of serum produced by an unusual quantity of water taken into the body.

2. Anaſarca *oppilata*, from compreſſion of the veins.

3. Anaſarca *exanthematica*, ſucceeding eruptions, particularly eryſipelas.

4. Anaſarca *anaemia*, from tenuity of blood, produced by hæmorrhage.

5. Anaſarca *debilium*, in perſons exhauſted by long diſeaſe, or other cauſes.

The Anaſarca purulenta can hardly be referred to this genus.

LXXV. HYDROCEPHALUS (ex ὑδωρ, *water*, and κεφαλη, *the head*).

Soft unelaſtic ſwelling of the head, the ſutures of the ſcull opening.

Vide vol. I. p. 168; and vol. IV. p. 134.

LXXVI. HYDRORACHITIS (ex ὑδωρ, *water*, and ῥαχις, *the ſpine*).

Soft ſmall ſwelling above the vertebræ of the loins, with their ſeparation.

Vide vol. II. p. 159.

LXXVII. HYDROTHORAX (ex ὑδωρ, *water*, and θωραξ, *the cheſt*).

Difficulty of breathing; paleneſs of the face; œdematous ſwellings of the lower extremities; ſcarcity of urine; difficult lying in a decumbent poſture; ſudden and ſpontaneous ſtarting out of ſleep, with palpitation of the heart; water in the cheſt fluctuating.

Vide vol. I. p. 171.

LXXVIII. ASCITES (ex ασκος, *a ſac*).

Swelling of the abdomen; tenſe; hardly elaſtic; with fluctuation.

Vide vol. I. p. 173.

1. The abdominal Aſcites (*Aſcites abdominalis*); with equal diffuſed tumour of the whole abdomen, and with ſenſible fluctuation.

It is varied by its cauſe; as,

a. From viſceral obſtruction.

b. From debility.

c. From tenuity of the blood.

d. From the nature of the liquid effuſed.

2. The encloſed or circumſcribed Aſcites (*Aſcites ſaccatus*), with partial ſwelling of the abdomen, at leaſt at the beginning, and with difficulty detected.

LXXIX. HYDROMETRA (ex ὑδωρ, *water*, and μητρα, *the womb*).

Vide vol. II. p. 274.

A ſwelling of the hypogaſtrium in women, gradually increaſing, reſuming the ſhape of the uterus; yielding to the preſſure, and fluctuating; not depending either on ſuppreſſion of urine or pregnancy.

LXXX. HYDROCELE (ex ὑδωρ, *water*, and κηλη, *a ſwelling*).

Vide vol. II. p. 275.

Tumour of the ſcrotum without pain, gradual in its increaſe, ſoft, fluctuating, pellucid.

§ 4. *SOLID* (*SOLIDÆ*).

LXXXI. PHYSCONIÆ (ex φυσκοω, *to be big-bellied*).

Partial abdominal tumor, without fluctuation, and giving no ſound when ſtruck.

Its varieties are,

1. The hepatic Phyſconia *(hepatica)*.
2. The ſplenic Phyſconia *(ſplenica)*.
3. The renal Phyſconia *(renalis)*.
4. The uterine Phyſconia *(uterina)*.
5. The ovarial Phyſconia *(ab ovario)*.
6. The meſenteric Phyſconia *(meſenterica)*.
7. The inteſtinal Phyſconia *(inteſtinalis)*.
8. The omental Phyſconia *(omentalis)*.
9. The mixed Phyſconia *(polyſplachna)*.
10. The viſceral Phyſconia *(viſceralis)*.
11. The external lupial Phyſconia *(externa lupialis)*.
12. The external ſchirroid Phyſconia *(externa ſchirrodea)*.
13. The external hydatidous Phyſconia *(externa hydatidoſa)*.
14. The ſubcutaneous fatty Phyſconia *(ab adipe ſubcutaneo)*.
15. The excreſcential Phyſconia *(ab excreſcentia)*.

LXXXII. RICKETS (RACHITIS; ex ῥαχις, *the back-bone*).

Head large, particular prominence of forehead, joints thick and ſwelled, ribs depreſſed, abdomen protuberant, emaciation of ſeveral other parts.

Vide vol. I. p. 187; and vol. IV. p. 151.

It varies, as being either

a. Simple, and uncombined with any other diſeaſe.

b. Or combined with other diſeaſes.

ORDER III. IMPETIGINES,

(ex *in*, and *petigo*, *a ſcab*).

Morbid affections of the ſkin, or external parts of the body, the conſequence of a depraved habit.

LXXXIII. KING's EVIL (SCROFULA; ex *ſcrofula*, *a pig*).

Vide vol. I. p. 184; and vol. IV. p. 132.

Tumors of the conglobate glands, indolent and hard, eſpecially in the neck, with little or no pain; a peculiar look or looſeneſs of the eye; the upper lip and fleſhy part of the noſe tumid; the face florid; the ſkin ſoft; the abdomen large.

1. The common Scrofula (*vulgaris*), ſimple, external, enduring.

2. The meſenteric Scrofula (*meſenterica*), ſimple, internal, with paleneſs of the face, want of appetite, tumor of the abdomen, and unuſual fœtor of the fæces.

3. The tranſient Scrofula (*fugax*), very ſimple, and only round the neck, generally occurring on reſorption from ulcers on the head.

4. The American Scrofula (*Americana*), joined with the yaws.

LXXXIV. VENEREAL DISEASE (SYPHILIS).

Primary affections of the genitals of a contagious nature, the effect of impure venery, ſucceeded by ulcers of the tonſils and cluſtered pimples on the ſkin, chiefly at the margin of the hair, going off in cruſts or ſcabby ulcers; alſo by pains in the bones, and protuberances of ſome parts of them.

Vide vol. I. p. 125; and vol. IV. p. 121.

LXXXV. SCURVY (SCORBUTUS).

Scurvy is an unuſual weakened ſtate of body, marked by bleeding of the gums, ſpots of different colours on the ſkin, for the moſt part livid, particularly at the roots of the hairs.

In cold countries, and following, for the moſt part, the uſe of a putreſcent diet or ſalted animal food, with deficiency of recent vegetable matter.

It varies in its degree and in its ſymptoms.

Vide vol. I. p. 176.

LXXXVI. ELEPHANTIASIS (ex *elephas, an elephant*).

Contagious; ſkin thick, wrinkled, rough, unctuous, diveſted of hair; loſs of feeling in the extreme joints; face deformed with tubercles; the voice hoarſe and naſal.

Vide vol. I. p. 191.

LXXXVII. LEPROSY (LEPRA, ex *lepis, a ſcale*).

The ſkin rough, with whitiſh, ſcaly, wrinkled ſcabs or ulcers, ſometimes humid below, with itchineſs.

LXXXVIII. FRAMBŒSIA (ex *framboiſe, a raſpberry*).

Swellings growing from various parts of the ſkin, the effect of ulceration, and reſembling the fruit of the raſpberry.

Vide vol. I. p. 161.

LXXXIX. TRICHOMA (ex τριχος, *to comb the hair.*)

Contagious; the hair unuſually coarſe, thick, and twiſted or matted together into inextricable knots or tufts.

XC. JAUNDICE (ICTERUS).

Yellowneſs of the eyes and ſkin, occaſionally changing to a brown or black colour; fæces whitiſh; the urine obſcurely red, tinging things dipped into it of a yellowiſh colour, and the ſame conſpicuous in the other excretions.

Vide vol. I. p. 179; and vol. IV. p. 36.

¶ 1. *Idiopathic.*

1. The calculous Jaundice (Icterus *Calculoſus*), with acute pain in the epigaſtric region, increaſed after meat, and with diſcharge of biliary concretions by ſtool.

2. The ſpaſmodic Jaundice (Icterus *ſpaſmodicus*), without pain, after ſpaſmodic diſeaſes, or affections of the mind.

3. The hepatic Jaundice (Icterus *hepaticus*), without pain, after diſeaſes of the liver.

4. The pregnant Jaundice (Icterus *gravidarum*), occurring during pregnancy, and diſappearing after delivery.

5. The infantile Jaundice (Icterus *infantum*), occurring in infants a few days after birth.

¶ 2. *Symptomatic.*

The febrile Jaundice (Aurigo *febrilis*).

The Indian Jaundice (Aurigo *Indica*), being the natural colour, which cannot be conſidered as a diſeaſe.

CLASS IV.

LOCALES.

The primary affection of a part, not of the whole body.

ORDER I. DYSÆSTHESIÆ,

(ex δυς, *bad*, and αισθησις, *feeling*).

Derangement of the external organ, producing depravation or loſs of ſome ſenſe.

XCI. CALIGO; *vulgò*, CATARACT.

Dimneſs or loſs of ſight, from the interpoſition of an opake film between the object and the retina; fixed either in the eye itſelf or in the eyelids.

Vide vol. II. p. 190.

1. The Dimneſs of the Lens (Caligo *lentis*), from an opake ſpot behind the pupil.

2. The Dimneſs of the Cornea (Caligo *corneæ*), from opacity of the cornea.

Varying according to the diſeaſe which produces the opacity.

3. The Dimneſs of the Pupil (Caligo *pupillæ*), from obſtruction of the pupil.

4. The Dimneſs of the Humours (Caligo *humorum*), from diſeaſe or defect of the aqueous humour.

Varying according to the different ſtate of the humour.

5. The Dimneſs of the Lids (Caligo *palpebrarum*), from diſeaſe of the eyelids.

Varying according to the diſeaſe.

XCII. AMAUROSIS (ex *αμαυρωσις, obscurity*; *vulgò*, GUTTA SERENA).

Dimneſs or loſs of ſight, without apparent diſeaſe in the eye; the pupil for the moſt part dilated and immoveable.

Vide vol. I. p. 218.

1. The Loſs of Sight depending on Compreſſion (Amauroſis *compreſſionis*), after the cauſes and with ſigns of congeſtion in the brain; and

Varying according to the remote cauſe.

2. The atonic Loſs of Sight (Amauroſis *atonica*), after the cauſes, with ſigns of debility.

3. The ſpaſmodic Loſs of Sight (Amauroſis *ſpaſmodica*), after the cauſes, and with ſigns of ſpaſm.

4. The Loſs of Sight (Amauroſis *venenata*), from poiſon, internal or external.

XCIII. DEPRAVED VISION (DYSOPIA; ex *δυς, bad*, and *οψις, vision*).

Depraved viſion, that objects are diſtinctly ſeen, only in a certain light, at a certain diſtance, or in a certain poſition.

1. The ſpecies from Darkneſs (Dyſopia *tenebrarum*), or objects not viſible except in a ſtrong light.

2. The ſpecies from Exceſs of Light (Dyſopia *luminis*), or objects not viſible except in an obſcure light.

3. The ſpecies where the perſon is termed Near-ſighted (Dyſopia *diſſitorum*), objects not ſeen at a great diſtance.

4. The ſpecies where the perſon is termed Far-ſighted (Dyſopia *proximorum*), or very near objects not ſeen.

5. The lateral ſpecies (Dyſopia *lateralis*), or objects not viſible, except in an oblique poſition.

XCIV. DEPRAVED VISION (PSEUDOBLEPSIS; ex ψευδο, *falſe*, and βλεψις, *ſight*).

Falſe viſion, ſo that a perſon thinks he ſees objects which do not exiſt, or ſees things that do exiſt differently from what they really are.

1. The imaginary Pſeudoblepſis (*imaginaria*), or where objects appear which in reality do not exiſt.

Varying according to the thing ſeen.

2. The changing Pſeudoblepſis (*mutans*), or where exiſting objects appear in ſome degree changed.

Varying according to the particular change of the objects, and alſo according to the remote cauſe.

XCV. DEAFNESS (DYSECOEA; ex δυς, *bad*, and ακουω, *to hear*).

Vide vol. I. p. 218.

Hearing impaired or loſt.

1. The organic Deafneſs (Dyſecoea *organica*), from fau't of the organs which tranſmit ſounds to the internal ear.

Alſo varying according to the fault and part effected.

2. The atonic Deafneſs (Dyſecoea *atonica*), without apparent defect in the organs tranſmitting ſounds.

Varying according to the cauſe.

XCVI. DEPRAVATION OF HEARING (PARACUSIS; ex παρα, *wrong*, and ακουω, *to hear*).

False hearing.

1. The imperfect Paracusis (*imperfecta*), where external sounds are perceived, but not accurately, or with the usual conditions.

Varying,

a. With dull hearing.

b. With too exquisite hearing.

c. With one external sound, doubled from internal causes.

d. With sounds which a person wishes to hear, not heard unless another sound be at the same time raised.

2. The imaginary Paracusis (*imaginaria*), where sounds not existing without are excited by internal causes.

Varying according to the sound perceived; and also according to the remote cause.

XCVII. DEFECT OF SMELLING (ANOSMIA; ex α neg. and οσμη, *smell*).

Smelling impaired or lost.

1. The organic Anosmia (*organica*), from a fault of the membrane investing the nostrils; and

Varying according to this fault.

2. The atonic Anosmia (*atonica*), without any evident fault of the membrane investing the nostrils.

XCVIII. DEFECT OF TASTING (AGHEUSTIA; ex α neg. and γευομαι, *to taste*).

The taſte impaired or loſt.

1. The organic Agheuſtia (*organica*), from fault in the membrane of the tongue preventing the application of ſapid bodies to the nerves.

2. The atonic Agheuſtia (*atonica*), without any evident fault of the tongue.

XCIX. DEFECT OF FEELING (ANÆSTHESIA).

The ſenſe of touch impared or loſt.

Order II. Dysorexiæ,

(ex δυς, *bad*, and ορεξις, *appetite*).

Falſe or defective appetite.

§ 1. *False Appetite.*

C. INSATIABLE HUNGER (BULIMIA; ex βους, *an ox*, and λιμος, *hunger*).

Appetite for a greater quantity of food than can be digeſted.

¶ 1. *The Idiopathic.*

1. The Bulimia of Gluttons (Bulimia *helluonum*) without diſeaſe of the ſtomach, with an appetite for a greater quantity of food than uſual.

2. The fainting Bulimia (*ſyncopalis*) with frequent deſire of food, from a ſenſe of hunger threatening ſyncope.

3. The Bulimia from vomiting (*emetica*) with deſire of food in great quantity, which is immediately vomited up again.

2. *The Symptomatic.*

CI. EXCESS OF THIRST (POLYDIPSIA; ex πολυς, *much*, and δίψος, *thirſt*).

Præternatural thirſt.

Vide vol. IV. p. 146.

CI. LONGING, OR FALSE APPETITE (PICA).

A deſire of eating what is not food.

Vide vol. III. p. 46.

CII. SATYRIASIS (σατυριασις, *a diſtenſion of the penis*).

Exceſſive deſire of venery in men.

1. The youthful Satyriaſis (*juvenilis*) with præternatural deſire of venery, while the body is at the ſame time little diſordered.

2. The ungovernable Satyriaſis (*furens*), with uncontrolable deſire of venery, while the body is at the ſame time much diſordered.

CIII. NYMPHOMANIA (ex νυμφη, *nymphæ*, and μανια, *inordinate paſſion*).

Uncontrolable deſire of venery, in women.

CIV. NOSTALGIA (ex *νοστεω, to return,* and *αλγος, sick*).

A vehement desire of revisiting their native country, in persons absent from it.

Its varieties are,

1. The simple Nostalgia (*simplex*), without any other disease.

2. The complicated Nostalgia (*complicata*), accompanied with other diseases.

§ 2. *Defective Appetites.*

CVI. ANOREXIA (ex *α* neg. and *ορεξις, appetite*).

Want of appetite for food.

Its varieties are,

1. The humoral Anorexia (*humoralis*), from humour loading the stomach.

2. The atonic Anorexia (*atonica*), from loss of tone in the fibres of the stomach.

CVII. WANT OF THIRST (ADIPSIA; ex *α* neg. and *διψος, thirst.*

Total want of desire for drink.

CVIII. ANAPHRODISIA (ex *α* priv. and *αφροδισια, venery*).

Defect of desire for venery.

ORDER III. DYSCINESIÆ,

(ex δυς, *bad*, and κινεω, *I move*).

Obſtructed or depraved motions, from a fault in the organs.

CIX. LOSS OF VOICE (APHONIA; ex α neg. and φονη, *voice*).

Total ſuppreſſion of the voice, without coma or ſyncope.

Its varieties are,

1. The guttural Aphonia (*gutturalis*), from ſwelling of the fauces and glottis.

2. The tracheal Aphonia (*trachealis*), from compreſſion of the trachea.

3. The atonic Aphonia (*atonica*), from injury of the nerves of the larynx.

CX. DUMBNESS (MUTITAS: ex μυτης, *dumb*).

Incapacity of ſpeaking.

Its varieties are,

1. The organic Mutitas (*organica*), from loſs or diſeaſe of the tongue.

2. The atonic Mutitas (*atonica*), from injury of the nerves of the tongue.

3. Mutitas of Deafneſs (*ſurdorum*), from being born deaf, or from loſs of hearing in early years.

CXI. PARAPHONIA (ex *παρα, wrong,* and *φωνη, ſound*).

Depraved ſound of voice.

Its varieties are,

1. The Paraphonia of Puberty (*puberum*), or the voice changed, about the age of puberty, from an acute and ſoft to a grave and harſh tone.

2. Paraphonia, with Hoarſeneſs (*rauca*), from dryneſs or flaccid tumour of fauces, the voice hoarſe and rough.

3. The reſounding or naſal Paraphonia (*reſonans*), from obſtruction in the noſtrils, the voice rough, with a hiſſing ſound in the noſe.

4. The rough palatine Paraphonia (*palatina*), from the uvula being wanting or divided, and in general attended with a hare-lip; the voice rough, obſcure, and diſagreeable.

5. The ringing Paraphonia (*clangens*); the voice aſſuming an acute, ſhrill, and weak tone.

6. The ſnoring Paraphonia (*comatoſa*), from laxity of the velum palati and of the glottis; a ſound emitted at inſpiration.

CXII. PSELLISMUS (ex *σπιλισμα, hesitation of speech*).

Faulty articulation.

Its varieties are,

1. The ſtammering Pſelliſmus (*hæſitans*), or where, in ſpeaking, the words, and chiefly the firſt words, are with difficulty uttered, and the firſt ſyllable only frequently repeated.

2. The ringing Pſelliſmus (*ringens*); or, where the ſound of the letter R is always aſpirated, and, as it were, doubled.

3. The lallant Pſelliſmus (*lallans*), the ſound of the letter L made more ſoft, or pronounced inſtead of the letter R.

4. The ſoft Pſelliſmus (*emolliens*), the harſher letters changed into ſofter ones, and the letter S much uſed.

5. The balbutient Pſelliſmus (*balbutiens*), from a large or ſwoln tongue, and when the labial letters are much ſounded, and often uſed inſtead of others.

6. The labid Pſelliſmus (*acheilos*), or impoſſibility or difficulty of pronouncing the labial letters.

7. The guttural Pſelliſmus (*lagoſtomatum*), where, from the palate being divided, the guttural letters are not juſtly pronounced.

CXIII. STRABISMUS (ex στραβίζω, *to ſquint*).

The optic axes of the eyes not converging.

Its varieties are,

1. The habitual Strabiſmus (*habitualis*), from a depraved cuſtom of uſing one eye only.

2. The accommodating Strabiſmus (*commodus*), from debility or greater mobility of one eye, ſo that both cannot be mutually employed.

3. The unavoidable Strabiſmus (*neceſſarius*), from altered ſituation or figure of certain parts of the eye.

CXIV. DYSPHAGIA (ex δυς, *bad*, and φαγω, *to eat*).

Impeded deglutition, without phlegmaſia or the reſpiration being affected.

CXV. CONTRACTION (CONTRACTURA).

The continued and rigid contraction of one or more of the joints.

Its varieties are,

1. The primary Contraction (*Contractura primaria*), from the muſcles being contracted and rigid, in conſequence of

a. Inflammation.

b. Spaſm.

c. Paralyſis of their antagoniſts.

d. Irritating acrimony.

2. The articular contraction (*articularis*), from rigidity of a joint.

ORDER IV. INCREASED DISCHARGES (APOCENOSES, ex ἀποκινεω, *I move from*).

Unuſual flux of blood or other humours, without fever or increaſed force of circulation.

CXVI. PROFUSIO.

Flux of blood.

CXVII. EPHIDROSIS, (ex εφιδρωσις, *abundant in water*).

Exceſſive ſweating.

CXVIII. EPIPHORA (ex επιφορα, *a flood*).

Morbid flow of tears, or the lacrymal fluid.

¶ 1. The Idiopathic.

2. The Symptomatic.

CXIX. SALIVATION (PTYALISMUS, ex πτυαλιζω, *to spit often*).

Morbid discharge of saliva.

CXX. ENURESIS (ex ενυρεω, *to be unable to retain urine*).

Involuntary flow of urine without pain.

1. The atonic Enuresis (*atonica*), after diseases injuring the sphincter of the bladder.

2. Slow irritation (Enuresis *irritata*), in consequence of compression or irritation of the bladder.

Vide vol. II. p. 323.

CXXI. GONORRHŒA (ex γονη, *the seed*, and ῥεω, *to flow*).

In men, a morbid discharge of fluid from the urethra, with or without venereal desire.

Vide vol. I. p. 132.

1. The pure (Gonorrhœa *pura*), without previous impure copulation, flux of a humour-like pus from the urethra, without suppression of urine or libidinous inclination.

2. The impure (Gonorrhœa *impura*), after impure co-

pulation, flux of a puriform humour from the urethra, with difficulty of making water.

This is followed by

The mucous Gonorrhœa, or gleet (*mucosa*), after Gonorrhœa impura, flux of a mucous humour from the urethra, with little or no difficulty of making water.

A Gleet.

3. Great debility, termed Seminal Weakneſs (Gonorrhœa *laxorum*), diſtillation of a humour, in general pellucid, from the urethra, without erection of the penis, but with libidinous inclination when the perſon is awake.

4. The ſleeping Gonorrhœa (*dormentium*), emiſſion of the ſeminal fluid, with erection and luſtful inclination of perſons aſleep, from impure dreams.

Spurious ſpecies, where there is no flux from the urethra.

Order V. Epischeses,

(ex επισχω, *to ſtop*).

Suppreſſion of Excretions.

CXXII. OBSTIPATIO.

No diſcharge of fæces, or but ſeldom.

Vide vol. I. p. 209.

1. The obſtipation from weakneſs (*debilium*), in perſons of a lax, weak, and in general dyſpeptic habit.

2. Obſtipation from rigidity (*rigidorum*), in perſons of a rigid, often hypochondriac temperament.

3. The Obſtipation from obſtruction (*obſtructorum*), with ſymptoms of colic.

CXXIII. ISCHURIA (ex εσχω *to reſtrain*, and ουρον, *urine*).

Vide vol. II. p. 318.

1. The renal Suppreſſion (Iſchuria *renalis*), ſucceeding diſeaſe of the reins, with pain or uneaſy ſenſation of weight in the region of the reins, and without ſwelling of the hypogaſtrium, or deſire of making water.

2. The ureterical Suppreſſion (Iſchuria *urcterica*), ſucceeding diſeaſe of the reins, with pain or uneaſy ſenſation in ſome part of the ureters, and without ſwelling of the hypogaſtrium, or deſire of making water.

3. The veſicular, or water-ſuppreſſion (Iſchuria *veſicalis*), with ſwelling of the hypogaſtrium, pain at the neck of the bladder, and frequent deſire of making water.

4. The urethral Suppreſſion (Iſchuria *urethralis*), with ſwelling of the hypogaſtrium, frequent deſire of making water, and pain in ſome part of the urethra.

CXXIV. DYSURIA (ex δυς, *difficult*, and ουρον, *urine*).

Painful, and ſometimes obſtructed emiſſion of urine.

Vide vol. II. p. 318.

1. The ardent (Dyſuria *ardens*), with burning heat in the urine, without any evident diſeaſe of the bladder.

2. The ſpaſmodic (Dyſuria *ſpaſmodica*), from ſpaſm of other parts communicating with the bladder.

3. The Dyſuria from compreſſion (*compreſſionis*), from preſſure of the bladder by the neighbouring parts.

4. The inflammatory (Dyſuria *phlogiſtica*), from inflammation of the adjacent parts.

5. The Dyſuria from irritation (*irritata*), with ſymptoms of the ſtone.

6. The mucous Dyſuria (*mucoſa*), with copious excretion of mucus.

CXXV. DYSPERMATISMUS (ex δυς, *bad*, and σπερμα, *ſeed*).

In the venereal act, the emiſſion of ſemen ſlow, obſtructed, or inſufficient for the purpoſe of generation.

1. The urethral Dyſpermatiſmus (*urethralis*), from diſeaſe of the urethra.

2. The knotty or nodoſe Dyſpermatiſmus (*nodoſus*), from nodes in the corpora cavernoſa.

3. The preputial Dyſpermatiſmus (*præputialis*), from too narrow opening of the prepuce.

4. The mucous Dyſpermatiſmus (*mucoſus*), from mucus clogging the urethra.

5. The over-erected Dyſpermatiſmus (*hypertonicus*), from too great erection of the penis.

6. The epileptic Dyſpermatiſmus (*epilepticus*), from ſpaſmodic epilepſy, coming on in coitu.

7. The indolent Dyſpermatiſmus (*apractodes*), from ſluggiſhneſs of the genitals.

8. The refluent Dyſpermatiſmus (*refluus*), no emiſſion of ſemen in coitu, occaſioned by its reflux out of the urethra into the bladder.

With regard to the Dyſpermatiſmus ſeroſus, I am not certain.

CXXVI. AMENORRHŒA (ex α neg. and μην, *the menſes*).

Vide vol. I. p. 105.

The menſes, in women not pregnant, either ſmaller in quantity than common, or totally obſtructed.

1. Green ſickneſs (Amenorrhœa *emanſionis*), in females, after the age of puberty, the menſes not appearing, with, at the ſame time, various morbid affections.

2. The ſuppreſſion of the Menſes (Amenorrhœa *ſuppreſſionis*), in adults, ſuppreſſion of the menſes, after they have appeared.

3. The difficult diſcharge of Menſes (Amenorrhœa *difficilis*, the menſes flowing but in ſparing quantity, and with pain.

ORDER VI. TUMORES.

Increaſed bulk of a part without inflammation.

CXXVII. ANEURISMA (ex *ανευρισμος, dilatation*).

Soft tumor, with pulſation, on an artery.

Vide vol. II. p. 82.

CXXVII. VARIX.

Soft tumor, without pulſation, on a vein.

CXXIX. ECCHYMOMA (ex *εχυμοσις, extravaſation of blood*).

Diffuſe tumor, little elevated and ſomewhat livid.

CXXX. SCIRRHUS (ex *σκιῤῥος, a chip of marble*).

Hard tumor of a particular part, moſtly of a gland, without pain.

Vide vol. II. p. 259 and 294.

CXXXI. CANCER.

Painful ſcirrhous tumor, ending in a foul ulcer.

Vide vol. II. p. 204; and vol. II. p. 113.

CXXXII. BUBO (ex *βουϐον, a ſwelling in the groin*).

Suppurating tumor of a conglobate gland.

Vide vol. I. p. 154; vol. II. p. 132.

CXXXIII. SARCOMA (ex *σαρξ, fleſh*).

Soft excreſcence, not painful.

CXXXIV. VERRUCA.

Hard, rough excreſcence.

Vide vol. II. p. 157.

CXXXV. CLAVUS.

Lamellated induration of the cuticle.

Vide vol. II. p. 144.

CXXXVI. LUPIA.

Moveable ſwelling under the ſkin, ſoft, and not painful.

CXXXVII. GANGLION.

Hard, moveable ſwelling, ſeated on a tendon.

Vide vol. II. p. 152.

CXXXVIII. HYDATIS (ex *ὑδατις, a bladder*).

Veſicle upon the ſkin, full of an aqueous humour.

Vide vol. II. p. 144.

CXXXIX. HYDARTHRUS (ex *ὑδωρ, water*, and *αρθρον, a joint*).

Tumor of the joints, chiefly of the knee, not much raiſed at firſt, of the ſame colour with the ſkin, very painful, and diminiſhing the power of motion.

Vide vol. II. p. 154.

CXL. EXOSTOSIS, (εξ, and οστεον, *a bone*).

Hard tumor, ſeated on a bone.

Vide vol. II. p. 161.

ORDER VII. ECTOPIÆ (ex εκτοπιζω, *I thruſt out*).

A ſwelling ariſing from a part thruſt out of its proper place.

CXLI. HERNIA.

Ectopia of a ſoft part, ſtill covered with the ſkin and other integuments.

Vide vol. II. p. 286.

CXLII. PROLAPSUS.

Ectopia of a ſoft part, not covered.

Vide vol. II. p. 326.

CXLIII. LUXATIO.

A bone thruſt out of its proper place.

Vide vol. II. p. 356.

ORDER VIII. SOLUTIONS OF CONTINUITY (DIALYSES, ex διαλυο, *to diſſolve*).

Diviſion of a part, manifeſt to inſpection or feeling.

CXLIV. A WOUND (VULNUS).

A recent ſolution of ſubſtance in a ſoft part, the effect of external injury.

Vide vol. II. p. 9.

CXLV. ULCUS.

A chronic ſolution of a ſoft part, with a vitiated diſcharge.

Vide vol. II. p. 88.

CXLVI. HERPES.

Numerous puſtules, or little ulcers, in cluſters, ſpreading, and difficult to heal.

Vide vol. I. p. 220; vol. II. p. 109; and vol. IV. p. 120.

CXLVII. TINEA.

Small ulcers at the roots of the hair, upon the ſcalp, diſcharging a humour, and ending in a whitiſh, crumbly ſcab.

Vide vol. I. p. 222.

CXLVIII. PSORA.

Puſtules and ſmall itchy ulcers, contagious, affecting the hands.

Vide vol. I. p. 223.

CXIX. FRACTURE (FRACTURA).

A part or parts of a bone violently ſeparated into fragments.

Vide vol. II. p. 339; and vol. IV. p. 164.

CL. CARIES.

Ulcerated ſtate of a bone.

Vide vol. II. p. 99.

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